



VAMPIRE & ENERGY WORK RESEARCH SURVEY

An Introspective Examination
of the Real Vampire Community

Authorized Edition vI.O
22 March 2006

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Purpose & Significance:

The *Vampire & Energy Work Research Survey* is conducted by the Atlanta Vampire Alliance [AVA] with support from various Houses and elders from the vampire community. This survey will address questions about the vampiric experience which have consistently been brought forward as concerns, either by members of the Community or by outside researchers in the professional or academic sectors. We have divided these concerns into the eleven topics which comprise the focus of this survey. We see these recurring questions as evidence of a need, felt by outside researchers and Community members alike, for a larger body of reliable knowledge about how vampires describe their personal experiences of dealing with their condition. We will attempt to gather data regarding these issues by researching specific cultural, physical, psychological, and emotional conditions that actually exist as written and reported from a vampire perspective. To this end, we intend to directly address these concerns: we will examine the different traits associated with the vampiric condition from feeding habits to psychic abilities; we will examine who vampires are, their backgrounds, educations, and religious or spiritual choices; we will gather data on how individuals experience their personal vampirism and how they experience the vampire community; and we will distinguish the differences between real vampirism and the role playing phenomenon.

Our goal is to provide this data in a comprehensive printed and digitally available analysis to the community as a resource for our deeper understanding of modern vampirism. We anticipate the results will provide a strong basis of fact and theoretical framework from which to dispel the popular misconceptions held by the public community, and highlight the flaws in the conventional theories of the scientific and academic communities regarding their frequent treatment of vampirism as both a cult and a dangerous practice. We hope that with the data gathered in this study available to the scholarly community as well as the vampire community, the questions that scholarly professionals have posed about us may be addressed from a solid factual base - the experiences reported by actual members of the Community. Furthermore, we intend to apply the raw data collected from this survey to several ongoing studies. The results will provide us with a statistical insight into the commonalities shared among real vampires and assist in identifying traits that may commonly occur in the public population but are misdiagnosed or dismissed. Using the census aspect of this study we will be able to evaluate the concentration of vampires in major metropolitan areas and throughout the world. This will permit us to highlight pockets of vampires that exist but may be under-represented in the Community. We will also be collecting personal family heredity information that will aid in establishing the frequency of vampirism throughout different generations and possible consideration of genetic inheritance theories. While this study employs a concurrent triangulation strategy, the qualitative aspects of our research will allow for a case study examination that covers the primary spectrum of beliefs and opinions held by the vampire community. The potential knowledge this survey may provide to the vampire community merits an extensive networking effort to gather support and participation.

In the pursuit of this goal, we believe that we are following in the tradition of, and building upon, the earliest efforts of members of our Community to share their experiences with each other online, on websites, forums, and in person discussions. The goal then, as it is now, was above all to help one another understand our experiences, and to enrich our Community's understanding of itself. While conducting this research we are committed to remaining neutral and abstaining from controversial rhetoric that could be viewed as biased. As researchers, we recognize that we have a responsibility to be both fair and thorough in serving our

community. This is ultimately an effort by the Community, and for the Community, which we hope will also reach beyond our boundaries, to be a body of knowledge from which outside scholars can draw when trying to understand the reality of our lives and experience.

Ethical Considerations:

All involved with this project are deeply concerned with the safety, well-being, and happiness of the members of our Community. We believe that this study will be of aid to the Community as a whole, to help us understand each other and our situation, and to allow us as a Community to answer the analyses of outside researchers in our own words. This study will also benefit the individual respondents by providing an opportunity for reflection and examination of their unique individual experiences.

Participation in this study is completely voluntary; members of the Community who choose to participate should do so in order to further the Community's knowledge, and should use their own judgment to decide whether participation is a positive, safe, and healthy activity based upon their own individual circumstances. Any participant may remove themselves from the study at any time, and may also ask questions of those administering the survey via anonymous e-mail for the duration of this study.

We are concerned with the safety and well-being of our Community members, and therefore acknowledge that for some individuals participation may put them at some form of risk. Having this survey in one's possession, accessing the URL of the online version, or being observed in the process of completing the survey may cause risk or harm to some individuals from those outside the Community. Participants are the sole judges of their circumstances, and we encourage participation by only those Community members who feel that their situation will not be adversely affected, either emotionally, physically, economically, socially, or in any other manner, by any aspect or stage of participation.

Privacy Considerations:

The enforcement of privacy and ethical standards while conducting this research is paramount to all involved with this project. We wish to make the smallest footprint on the Community as possible in the distribution of and collection of data from this survey.

No response that yields information which could be used to locate or personally identify respondents or other members of the community should be given at any time. We will vigorously safeguard the privacy of our participants by employing various security measures to ensure complete anonymity. All form submissions completed online will be processed over a secure server, results stored offline, and no internet protocol addresses (IP) will be kept via an online log. Participants may also choose to safely submit this survey from an anonymous e-mail or by postal mail. Only raw statistical data collected from this survey in coded form will be made available to the general public once an internal review and analysis has been completed. After the cessation of this data collection all responses will be stored under lock and key in a secure location, never to be shared with other researchers or persons outside of the administrative body involved in this study, however, the aggregated data from the study, as well as analysis of that data and conclusions drawn from that data will be made publicly available.

If the survey is submitted online the participant will receive a unique seven digit code that may be utilized to remove their survey from final data analysis if chosen by the participant. If the participant completes this survey offline or via e-mail we ask that they write a random seven digit series of letters and numbers at the end of the final question under "exclusion option" so that the same consideration to privacy exclusion may be exercised as mandated by various international standard codes of ethics and institutional review board guidelines.

Survey Focus:

- 01 - Statistical & Demographic
- 02 - Personal & Family Background
- 03 - Personal Culture & Environment
- 04 - Spiritual Beliefs
- 05 - Awakening
- 06 - Knowledge
- 07 - Vampire Beliefs & Paths
- 08 - Community Involvement
- 09 - Feeding & Donor
- 10 - Community Ethics
- 11 - The Future

Definitions & Precedent:

As an extension to the theory defined in this mixed methodology study we will attempt to explain the viewpoints of real vampirism rather than propose a controversial “universal” definition that would ultimately serve to exclude certain participants in the community. We recognize that claims of what comprises “true vampirism” or “living vampirism” varies to an almost infinite degree within the Community. However, generally there are universal characteristics shared among the majority that we hope will temporarily unite those who hold differences of opinion while completing this survey. Only the individual understands his or her own vampirism, path, and code of ethics and therefore, should answer all questions out of respect and in accordance with their own personal beliefs.

A vampire is essentially a blood drinker or an energy feeder that may display various levels of psychic ability. The vampires that are the focus of this study are individuals who cannot adequately sustain their own physical, mental, or spiritual well-being without the taking of blood or vital life force energy from other sources; often human. Without feeding (whether by a regular or infrequent schedule) the vampire will become lethargic, sickly, and often go through physical suffering or discomfort. Vampires often display signs of empathy, sense emotions, perceive auras of other humans, and are generally psychically aware of the world around them.

The supernatural, mythical, or vampire of popular romantic literature will not be examined in this study. While we will discuss the other more metaphorical applications of the term “vampire”, (psychological, clinical, criminal, blood fetishists, autovampirism, energy leeches, non-vampire lifestylers, or roleplayers), these are not the central focus nor should be used as a basis by which to answer the majority of these study questions.

The following section represents the various categories that relate to the modern classification of vampires as defined by feeding method. Terminology is haphazard and problematic within the Community, and the attempt is made below to acknowledge alternative spellings, and identify distinctions (some of which are controversial) which are made by some Community members.

The most common and universal distinction made within the Vampire Community is the distinction, based on feeding method, between Sanguinarian and Psi Vampires.

Sanguine Vampires (Sanguinarian) feed by the drinking of blood - either human or animal. *Sanguinarian* vampires can vary in their experience of blood hunger and in how often or in what quantities they need to feed, but the unique craving for blood and the physical symptoms associated with neglecting to drink blood are unifying features of sanguinarian vampirism. This term is commonly shortened to *sang*. Not all members of the Community actually acknowledge the difference between psychic and sanguinarian vampirism, and there is a popular but not universally-held theory within the Community that the life force energy or “prana” contained within the blood is the source from which they feed, rather than any physical component of the blood itself. This theory is supported by the notably small amount of blood that vampires consume to alleviate their hunger, but challenged by the fact that vampires who consider themselves primarily blood drinkers often do not display

as many or any of the psychic tendencies that psychic vampires do, and more often report more physical symptoms, such as sense acuity and physical strength, than do the psychic vampires.

Psi Vampires are understood to feed psychically on life force energy. Psi (or psy) feeding is usually performed on a willing individual or from the ambient energies of a large group or crowd. This term is often mistakenly confused with the pop psychology use of “psychic vampire” or “psychological vampire”, used as a metaphor to describe specific socially manipulative behaviors. The most common usage within the Community, however, does not include this metaphor. *Psi vampire*, refers to a vampire who feeds by some manner of energy transfer; this term may also be shortened to *psivamp*. *Psy vampire*, and “psychic vampire” are sometimes considered synonyms for *psi vampire*, but are also sometimes employed as separate terms with distinctive meanings. For example, “psi” is often employed as a synonym for ESP phenomena in parapsychology, and “psy” is short for either “psychic” or “psychological.” Those who make distinctions between these terms may use these meanings as the basis for their reasoning.

Hybrid or Psi/Sang Vampires claim to have no primary feeding method, being able to feed from either source at any time. Others report changing their primary feeding source from energy to blood, or vice versa, at various points in their lives. Some, but not all, vampires who can feed or have fed via both methods choose to describe themselves as *Psi/Sang* or *Hybrid* vampires.

Some Community members go further to define sub-classes of vampirism based on the detailed methods and sources of psychic feeding. These classes are most often distinguished from one another based on the type of energy gained. Those who feed from natural or elemental energy, and those who feed from humans either during sexual contact, during magickal rituals, or during times of high emotional output may be described as specific types of vampires. Further subcategories of psi feeding energy exist, including terminology to describe those who feed from direct contact with the human aura, those who feed from the ambient energy of crowds and public places, those who can only absorb certain kinds of emotions, etc. While we respect individuals' choices of self-description, untangling the definitional problems surrounding these distinctions is beyond the scope of this study, and for our purposes, only the distinctions between blood drinkers and energy feeders will be addressed, with some attention given to the primary psychic source of psi feeding.

Survey Instructions:

This survey is not timed or monitored, however, we ask that you complete it without assistance from others and while in an alert state of mind. The complexity of this study warrants a serious commitment of both time and mature consideration of each question before answering. If you are unwilling or able to dedicate yourself in this manner please refrain from participation. All information is strictly confidential; therefore, **please do NOT fill in responses of a personally identifiable nature** in sections that require written answers. If completing by hand please “x” out () or fully darken the boxes that correspond with each question; avoid checking () the boxes and print legibly. You may complete this survey in either digital form: MS Word *Forms Document* - click boxes and fill out, **save**, and submit via anonymous e-mail to response@suscitatio.com, or through your local House, et al. in printed form by returning to the address provided below. If mailing, please either use the same shipping address for the return address or simply leave blank if mailing within the U.S. Please affix the proper postage based on weight if mailing and complete the shipping label exactly as written:

Domestic U.S. Mail

V. Survey
6300 Powers Ferry Rd.
Suite 600 - 283
Atlanta, GA 30339

International Post

V. Survey
6300 Powers Ferry Rd. NW
Suite 600 - 283
Atlanta, GA 30339-2919
USA

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Please answer truthfully, completely, and to the best of your ability. All information is strictly confidential, therefore, please do not fill in responses of a personally identifiable nature in sections that require written answers. If completing by hand, please print legibly.

Statistical & Demographic

001. Sex:

- Male
 Female

002. Age:

- | | |
|--|---|
| <input type="checkbox"/> Under 14 Years Of Age | <input type="checkbox"/> 30 - 34 Years Of Age |
| <input type="checkbox"/> 14 - 15 Years Of Age | <input type="checkbox"/> 35 - 39 Years Of Age |
| <input type="checkbox"/> 16 - 17 Years Of Age | <input type="checkbox"/> 40 - 44 Years Of Age |
| <input type="checkbox"/> 18 - 19 Years Of Age | <input type="checkbox"/> 45 - 49 Years Of Age |
| <input type="checkbox"/> 20 - 24 Years Of Age | <input type="checkbox"/> 50 - 54 Years Of Age |
| <input type="checkbox"/> 25 - 29 Years Of Age | <input type="checkbox"/> Over 54 Years Of Age |

003. Place Of Current Residence:

City/Town: _____
State/Province/Region: _____
Country: _____

004. Ethnicity:

- | | |
|--|---|
| <input type="checkbox"/> Asian Descent | <input type="checkbox"/> Native American Decent |
| <input type="checkbox"/> Black / African Descent | <input type="checkbox"/> Pacific Islander Descent |
| <input type="checkbox"/> East Indian Descent | <input type="checkbox"/> White / European Descent |
| <input type="checkbox"/> Latino / Hispanic Descent | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Middle Eastern Descent | |

005. Current Marital Status:

- | | |
|---|--|
| <input type="checkbox"/> Single - <i>Never Married</i> | <input type="checkbox"/> Married / Civil Union / Partnership |
| <input type="checkbox"/> Single - <i>Previously Married</i> | <input type="checkbox"/> Divorce In Process |
| <input type="checkbox"/> Engaged / Long Term Relationship | <input type="checkbox"/> Widowed |

006. Primary Sexual Orientation:

- | | |
|---------------------------------------|------------------------------------|
| <input type="checkbox"/> Heterosexual | <input type="checkbox"/> Bisexual |
| <input type="checkbox"/> Homosexual | <input type="checkbox"/> Pansexual |

Personal & Family Background

007. Where were you born?

City/Town: _____
State/Province/Region: _____
Country: _____

008. What year were you born? *(Please Limit Responses To 20th Century)*

Year: _____

009. What day of the month were you born?

Day (1 - 31): _____

010. What month were you born?

- | | |
|-----------------------------------|------------------------------------|
| <input type="checkbox"/> January | <input type="checkbox"/> July |
| <input type="checkbox"/> February | <input type="checkbox"/> August |
| <input type="checkbox"/> March | <input type="checkbox"/> September |
| <input type="checkbox"/> April | <input type="checkbox"/> October |
| <input type="checkbox"/> May | <input type="checkbox"/> November |
| <input type="checkbox"/> June | <input type="checkbox"/> December |

011. What day of the week were you born?

- | | |
|------------------------------------|---------------------------------------|
| <input type="checkbox"/> Sunday | <input type="checkbox"/> Thursday |
| <input type="checkbox"/> Monday | <input type="checkbox"/> Friday |
| <input type="checkbox"/> Tuesday | <input type="checkbox"/> Saturday |
| <input type="checkbox"/> Wednesday | <input type="checkbox"/> I Don't Know |

012. What general time of the day were you born?

- | | |
|------------------------------------|---------------------------------------|
| <input type="checkbox"/> Morning | <input type="checkbox"/> Evening |
| <input type="checkbox"/> Afternoon | <input type="checkbox"/> I Don't Know |

013. If known, under what moon phase were you born?

- | | |
|---|---|
| <input type="checkbox"/> Dark Moon | <input type="checkbox"/> Full Moon |
| <input type="checkbox"/> New Moon | <input type="checkbox"/> Waning Gibbous |
| <input type="checkbox"/> Waxing Crescent Moon | <input type="checkbox"/> Third Quarter Moon |
| <input type="checkbox"/> First Quarter Moon | <input type="checkbox"/> Waning Crescent Moon |
| <input type="checkbox"/> Waxing Gibbous | <input type="checkbox"/> I Don't Know |

014. Does your behavior change based on the phase of the moon?

- Yes
 No

015. If yes, which phase(s)? (Check All That Apply)

- | | |
|---|---|
| <input type="checkbox"/> Dark Moon | <input type="checkbox"/> Waning Gibbous |
| <input type="checkbox"/> New Moon | <input type="checkbox"/> Third Quarter Moon |
| <input type="checkbox"/> Waxing Crescent Moon | <input type="checkbox"/> Waning Crescent Moon |
| <input type="checkbox"/> First Quarter Moon | <input type="checkbox"/> I Don't Know |
| <input type="checkbox"/> Waxing Gibbous | <input type="checkbox"/> Not Applicable |
| <input type="checkbox"/> Full Moon | |

016. Do you have any siblings?

- Yes
 No

017. If yes, please indicate how many brothers and/or sisters:

- Brother(s) * Quantity: _____
 Sisters(s) * Quantity: _____
 Not Applicable

018. If you have siblings what is the order of your birth?

- | | |
|---|---|
| <input type="checkbox"/> 1 st Born | <input type="checkbox"/> 4 th Born |
| <input type="checkbox"/> 2 nd Born | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> 3 rd Born | <input type="checkbox"/> Not Applicable |

019. Do you have any biological children?

- Yes
 No

020. What country of origin or "ethnic background" would your biological family be considered?

Family Ethnicity: _____

021. What color are your eyes?

- | | |
|-------------------------------------|---|
| <input type="checkbox"/> Black | <input type="checkbox"/> Grey |
| <input type="checkbox"/> Blue | <input type="checkbox"/> Hazel |
| <input type="checkbox"/> Blue-Green | <input type="checkbox"/> Red / Albino |
| <input type="checkbox"/> Brown | <input type="checkbox"/> Heterochromia (Both Different) |
| <input type="checkbox"/> Green | |

022. Do the color of your eyes change in relation to your mood?

- Yes
 No

023. Would you classify your personality as introverted or extroverted?

*In the **introverted** attitude the energy flow is inward, and the preferred focus is on thoughts and ideas. Introverts tend to be quiet, low-key, deliberate, and disengaged from the social world.*

*In the **extroverted** attitude the energy flow is outward, and the preferred focus is on people and things. Extroverts tend to be energetic, enthusiastic, action-oriented, talkative, and assertive.*

- Introverted
- Extroverted

024. Have you ever taken the Myers-Briggs Type Indicator (MBTI) personality test?

- Yes
- No

025. If yes, to which type were you classified?

- | | | |
|-------------------------------|-------------------------------|---|
| <input type="checkbox"/> ISTJ | <input type="checkbox"/> INFP | <input type="checkbox"/> ESTJ |
| <input type="checkbox"/> ISFJ | <input type="checkbox"/> INTP | <input type="checkbox"/> ESFJ |
| <input type="checkbox"/> INFJ | <input type="checkbox"/> ESTP | <input type="checkbox"/> ENFJ |
| <input type="checkbox"/> INTJ | <input type="checkbox"/> ESFP | <input type="checkbox"/> ENTJ |
| <input type="checkbox"/> ISTP | <input type="checkbox"/> ENFP | <input type="checkbox"/> I Don't Remember |
| <input type="checkbox"/> ISFP | <input type="checkbox"/> ENTP | <input type="checkbox"/> Not Applicable |

026. Have you ever had your IQ measured by either a professionally accredited institution or administered under a controlled setting?

- Yes
- No

027. If yes, what was your score?

- | | |
|-------------------------------------|---|
| <input type="checkbox"/> Below 74 | <input type="checkbox"/> 132 to 137 |
| <input type="checkbox"/> 74 to 89 | <input type="checkbox"/> 137 to 150 |
| <input type="checkbox"/> 89 to 100 | <input type="checkbox"/> 150 to 164 |
| <input type="checkbox"/> 100 to 111 | <input type="checkbox"/> 164 to 176 |
| <input type="checkbox"/> 111 to 120 | <input type="checkbox"/> Above 176 |
| <input type="checkbox"/> 120 to 125 | <input type="checkbox"/> I Don't Remember |
| <input type="checkbox"/> 125 to 132 | <input type="checkbox"/> Not Applicable |

028. Have you ever taken or been administered an emotional intelligence (EQ) test?

- Yes
- No

029. Which of the following EQ tests have you taken?
(Check All That Apply & Indicate Score If Known)

- | | |
|--|----------------|
| <input type="checkbox"/> Mayer-Salovey-Caruso E.I. Test (MSCEIT) | * Score: _____ |
| <input type="checkbox"/> Emotional Competence Inventory (ECI) | * Score: _____ |
| <input type="checkbox"/> Emotional Quotient Inventory (EQ-i) | * Score: _____ |
| <input type="checkbox"/> Other: _____ | * Score: _____ |
| <input type="checkbox"/> Not Applicable | |

030. What is your educational level?

- Some High School - *Currently Completing*
- Some High School - *Never Completed*
- High School Graduate / GED
- Some College - *Currently Completing*
- Some College - *Never Completed*
- College Graduate
- Graduate School / PhD
- Other: _____

031. What is your individual yearly income level?

- Under 20,000 USD / 17,000 EUR
- 20,000 - 30,000 USD / 17,000 - 25,000 EUR
- 30,000 - 40,000 USD / 25,000 - 33,000 EUR
- 40,000 - 50,000 USD / 33,000 - 42,000 EUR
- 50,000 - 60,000 USD / 42,000 - 50,000 EUR
- 60,000 - 70,000 USD / 50,000 - 59,000 EUR
- 70,000 - 80,000 USD / 59,000 - 67,000 EUR
- 80,000 - 90,000 USD / 67,000 - 75,000 EUR
- 90,000 - 100,000 USD / 75,000 - 84,000 EUR
- 100,000 - 150,000 USD / 84,000 - 126,000 EUR
- 150,000 - 200,000 USD / 126,000 - 168,000 EUR
- Over 200,000 USD / 168,000 EUR

032. Which of the following do you value more in your life?

- Authority & Ordered Systems
- Individuality & Creative Expression

033. As a child, how would you have best classified your overall health?

- | | |
|------------------------------------|-------------------------------|
| <input type="checkbox"/> Excellent | <input type="checkbox"/> Fair |
| <input type="checkbox"/> Very Good | <input type="checkbox"/> Poor |
| <input type="checkbox"/> Good | |

034. As an adult, how would you now best classify your overall health?

- | | |
|------------------------------------|-------------------------------|
| <input type="checkbox"/> Excellent | <input type="checkbox"/> Fair |
| <input type="checkbox"/> Very Good | <input type="checkbox"/> Poor |
| <input type="checkbox"/> Good | |

035. Have you ever been diagnosed with any serious medical conditions that either required long term treatment and/or otherwise is a permanent or incurable illness?

Physical:

- Yes
- No

Mental:

- Yes
- No

036. If yes, are you currently receiving treatments for this condition?

- Yes
- No
- Not Applicable

037. Which of the following conditions have you been diagnosed with? (Check All That Apply)

Physical:

- Anemia
- Arteriosclerosis
- Asthma
- Autoimmune Diseases
- Blood Related Disorders
- Bone Fractures
- Cancer
- Cystic Fibrosis
- Chronic Fatigue Syndrome
- Diabetes
- Endocrine System Related Conditions
- Heart Disease
- Hemophilia
- Hepatitis
- High Blood Pressure
- High Cholesterol
- HIV / AIDS
- Hypoglycemia
- Hypothyroidism
- Immune System Disorders
- Infertility
- Lupus
- Migraines / Severe Headaches
- Multiple Sclerosis
- Porphyria
- Rheumatoid Arthritis
- Sickle Cell Anemia
- Spinal Meningitis
- Tuberculosis
- Other: _____
- Not Applicable

Mental:

- ADD / ADHD
- Amnesia
- Anorexia Nervosa
- Autism
- Bipolar Disorder
- Co-Dependency
- Dementia
- Depersonalization Disorder
- Depression (Clinical / Acute)
- Disassociative Disorders
- Kleptomania
- Manic Depressive
- Obsessive Compulsive Disorder
- Panic Attacks
- Post Traumatic Stress Syndrome
- Primary Insomnia
- Schizophrenia
- Schizotypal Personality Disorder
- Sleep Terror Disorder
- Social Anxiety Disorder
- Tourette's Syndrome
- Other: _____
- Not Applicable

038. Have you ever been under the care or treatment of a psychiatrist or psychologist?

- Yes - Psychiatrist
- Yes - Psychologist

- Yes - Both
- No

039. Are you currently prescribed and/or take psychiatric medication?

- Yes
- No

**040. If yes, which of the following psychiatric medication are your currently prescribed and/or taking?
(Check All That Apply)**

- | | | |
|-------------------------------------|-------------------------------------|---------------------------------------|
| <input type="checkbox"/> Abilify | <input type="checkbox"/> Librium | <input type="checkbox"/> Risperdal |
| <input type="checkbox"/> Adapin | <input type="checkbox"/> Lidone | <input type="checkbox"/> Serax |
| <input type="checkbox"/> Anafranil | <input type="checkbox"/> Lithane | <input type="checkbox"/> Serentil |
| <input type="checkbox"/> Asendin | <input type="checkbox"/> Lithobid | <input type="checkbox"/> Seroquel |
| <input type="checkbox"/> Ativan | <input type="checkbox"/> Loxitane | <input type="checkbox"/> Serzone |
| <input type="checkbox"/> Aventyl | <input type="checkbox"/> Ludiomil | <input type="checkbox"/> Sinequan |
| <input type="checkbox"/> Azene | <input type="checkbox"/> Luvox | <input type="checkbox"/> Stelazine |
| <input type="checkbox"/> BuSpar | <input type="checkbox"/> Marplan | <input type="checkbox"/> Surmontil |
| <input type="checkbox"/> Celexa | <input type="checkbox"/> Mellaril | <input type="checkbox"/> Taractan |
| <input type="checkbox"/> Centrax | <input type="checkbox"/> Moban | <input type="checkbox"/> Tegretol |
| <input type="checkbox"/> Cibalith-S | <input type="checkbox"/> Nardil | <input type="checkbox"/> Thorazine |
| <input type="checkbox"/> Clozaril | <input type="checkbox"/> Navane | <input type="checkbox"/> Tofranil |
| <input type="checkbox"/> Depakote | <input type="checkbox"/> Neurontin | <input type="checkbox"/> Topamax |
| <input type="checkbox"/> Desyrel | <input type="checkbox"/> Norpramin | <input type="checkbox"/> Tranxene |
| <input type="checkbox"/> Effexor | <input type="checkbox"/> Orap | <input type="checkbox"/> Trilafon |
| <input type="checkbox"/> Elavil | <input type="checkbox"/> Pamelor | <input type="checkbox"/> Valium |
| <input type="checkbox"/> Eskalith | <input type="checkbox"/> Parnate | <input type="checkbox"/> Vesprin |
| <input type="checkbox"/> Geodon | <input type="checkbox"/> Paxil | <input type="checkbox"/> Vivactil |
| <input type="checkbox"/> Haldol | <input type="checkbox"/> Paxipam | <input type="checkbox"/> Wellbutrin |
| <input type="checkbox"/> Klonopin | <input type="checkbox"/> Permitil | <input type="checkbox"/> Xanax |
| <input type="checkbox"/> Lamictal | <input type="checkbox"/> Pertofrane | <input type="checkbox"/> Zoloft |
| <input type="checkbox"/> Lexapro | <input type="checkbox"/> Prolixin | <input type="checkbox"/> Zyprexa |
| <input type="checkbox"/> Librax | <input type="checkbox"/> Prozac | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Libritabs | <input type="checkbox"/> Remeron | |

041. If you take psychiatric medications do they either adversely affect you in terms of their intended result or fail to affect your psychiatric or mental condition at all?

- Yes - Adverse Affect
- Yes - No Affect At All

- No - Most Often Work As Intended
- Not Applicable

042. Which of the following have you donated? (Check All That Apply)

- Blood
- Platelets
- Plasma

- Tissue / Organs
- None

043. Have you ever been disqualified from donating blood or blood products?

- Yes
- No
- Never Attempted To Donate Blood

044. If yes, for what reason were you disqualified from donating?

- | | |
|---|---|
| <input type="checkbox"/> Anemia | <input type="checkbox"/> Sexual Preference |
| <input type="checkbox"/> Blood Related Disorder | <input type="checkbox"/> Tattoos / Body Piercings |
| <input type="checkbox"/> Born Overseas | <input type="checkbox"/> Travel Abroad |
| <input type="checkbox"/> Drug Use | <input type="checkbox"/> Not Applicable |
| <input type="checkbox"/> Medically Disqualified | |

045. Have you ever been diagnosed with platelet related disorders? (Check All That Apply)

- | | |
|---|-------------------------------------|
| <input type="checkbox"/> Yes - Thrombocytopenia | <input type="checkbox"/> Yes - Both |
| <input type="checkbox"/> Yes - Thrombocytosis | <input type="checkbox"/> No |

046. Have you ever been told that you were deficient in vitamin B12?

- Yes
- No

047. Which of the following types of allergies have you been diagnosed with? (Check All That Apply)

- | | | |
|--|-------------------------------|-------------------------------|
| <input type="checkbox"/> Food Allergies | * Specific Allergen(s): _____ | |
| <input type="checkbox"/> Skin Allergies | | * Specific Allergen(s): _____ |
| <input type="checkbox"/> Respiratory Allergies | | * Specific Allergen(s): _____ |
| <input type="checkbox"/> Medicine Allergies | | * Specific Allergen(s): _____ |
| <input type="checkbox"/> Other Allergies | | * Specific Allergen(s): _____ |
| <input type="checkbox"/> None | | |

048. Do you believe you have an undiagnosed allergy?

- Yes
- No

049. If yes, what allergic reactions do you display?

Describe: _____

- Not Applicable

050. What is your blood type?

- | | | |
|------------------------------|------------------------------|---------------------------------------|
| <input type="checkbox"/> O+ | <input type="checkbox"/> O- | <input type="checkbox"/> I Don't Know |
| <input type="checkbox"/> A+ | <input type="checkbox"/> A- | |
| <input type="checkbox"/> B+ | <input type="checkbox"/> B- | |
| <input type="checkbox"/> AB+ | <input type="checkbox"/> AB- | |
| | | |

051. Have you ever suffered from hypersensitivity?

Hypersensitivity is an immune response that damages the body's own tissues.

- Yes
- No

052. If yes, which type(s) of hypersensitivity have you suffered? (Check All That Apply)

- TYPE 1 - Immediate (Atopic or Anaphylactic) - ie: Allergic Reactions, Allergic Asthma, Hives, or Anaphylactic Shock
- TYPE 2 - Subacute (Cytotoxic) - ie: Anemia, Transfusion/Transplant Rejection, or Cancer
- TYPE 3 - Immune Complex - ie: Persistent Infections, Lupus, Rheumatoid Arthritis, or Glomerulonephritis (Renal)
- TYPE 4 - Delayed (Cell-Mediated) - ie: Diabetes I or Contact Dermatitis
- TYPE 5 - Stimulatory - ie: Graves' Disease or Hyperthyroidism
- TYPE 6 - Congenital - ie: Severe Combined Immunodeficiency Syndromes (SCID)
- Not Applicable

053. Do you suffer from frequent minor illnesses?

- Yes
- No

054. Do you typically heal faster or slower than others around you suffering from similar conditions?

- Slower
- Faster
- No Discernable Difference

055. What type of eating schedule do you follow?

- Routine
- Varied

056. What time of day would you attribute yourself as being most active or mentally alert? (Check All That Apply)

- | | |
|---|--|
| <input type="checkbox"/> Early Morning (3 AM - 8 AM) | <input type="checkbox"/> Early Evening (6 PM - 9 PM) |
| <input type="checkbox"/> Mid Morning (8 AM - 12 PM) | <input type="checkbox"/> Mid Evening (9 PM - 11 PM) |
| <input type="checkbox"/> Early Afternoon (12 PM - 3 PM) | <input type="checkbox"/> Late Evening (11 PM - 3 AM) |
| <input type="checkbox"/> Mid Afternoon (3 PM - 6 PM) | |

057. How many hours of sleep do you typically receive in a 24 hour period?

- | | |
|--------------------------------------|---|
| <input type="checkbox"/> 1 - 2 Hours | <input type="checkbox"/> 9 - 10 Hours |
| <input type="checkbox"/> 3 - 4 Hours | <input type="checkbox"/> 11 - 12 Hours |
| <input type="checkbox"/> 5 - 6 Hours | <input type="checkbox"/> More Than 12 Hours |
| <input type="checkbox"/> 7 - 8 Hours | |

058. Do you ever experience a loss of awareness or rapidly perceived passing of more than 24 hours of time when not under the influence of any illegal or controlled substance?

- Yes
- No

059. What is your typical level of performance when placed in emotionally stressful or high pressure situations?

- Excellent
- Very Good
- Good
- Fair
- Poor

060. Have you ever suffered from a lack of nerve sensation?

- Yes
- No

061. Were you born with a physical abnormality?

- Yes
- No

062. Are you ambidextrous?

Ambidexterity is the ability of being equally adept with each hand (or, to a limited degree, feet).

- Yes
- No

063. Which hand do you most often use to write with?

- Right
- Left

064. Are you double jointed?

- Yes
- No

065. Is your second toe longer than your first?

- Yes
- No

066. Do you have a birthmark?

- Yes
- No

067. Are you photosensitive?

People that are **photosensitive** experience discomfort or get easily sunburned when exposed to UV light, which may come from sunlight or other sources including sunbeds.

- | | |
|---|-------------------------------------|
| <input type="checkbox"/> Yes - Skin | <input type="checkbox"/> Yes - Both |
| <input type="checkbox"/> Yes - Visual Sensitivity | <input type="checkbox"/> No |

068. Do you have visual sensitivity to light at night or night blindness?

- | | |
|---|-------------------------------------|
| <input type="checkbox"/> Yes - Visual Sensitivity | <input type="checkbox"/> Yes - Both |
| <input type="checkbox"/> Yes - Night Blindness | <input type="checkbox"/> No |

069. Has your hearing ever been tested?

- Yes * Hearing Rating (*If Known*): _____
- No

070. Would you describe your hearing as "above normal" or "better than average"?

- Yes
- No

071. Has your vision ever been tested?

- Yes * Vision Rating (*If Known*): _____
- No

072. Do you have a corrective vision prescription?

- Yes
- No

073. Do you have a photographic (eidetic) memory?

- Yes
- No

074. Do you suffer from dyslexia?

- Yes
- No

075. Do you frequently suffer from persistent or severe headaches?

- Yes
- No

076. If given a choice of temperate climates to which would you gravitate?

- Warmer
- Colder

077. Are you aware of a family history of unexplained paranormal abilities, aptitudes, or sensitivities?

- Yes
- No

078. Are you aware of a family history of either being able to recognize, attract, or channel spirits, ghosts, or disembodied entities?

- Yes
- No

079. Are you aware of a family history of clairvoyance?

Clairvoyance is defined as a form of extra-sensory perception whereby a person perceives distant objects, persons, or events, including "seeing" through opaque objects and the detection of types of energy not normally perceptible to humans (i.e. radio waves). Typically, such perception is reported in visual terms, but may also include auditory impressions (sometimes called clairaudience) or kinesthetic impressions.

- Yes
- No

**080. Do you personally possess the ability of, or have personally experienced clairvoyance?
(Please Answer Both Parts)**

- Yes - Personal Ability
- No - Personal Ability

- Yes - Personal Experience
- No - Personal Experience

081. Are you aware of a family history of clairaudience?

Clairaudience is the ability to hear things not audible within normal hearing ranges. This is an example of extra-sensory perception (ESP).

- Yes
- No

**082. Do you personally possess the ability of, or have personally experienced clairaudience?
(Please Answer Both Parts)**

- Yes - Personal Ability
- No - Personal Ability

- Yes - Personal Experience
- No - Personal Experience

083. Are you aware of a family history of astral projection?

Astral projection (astral travel) is an interpretation of out-of-body experiences (OBEs) achieved either consciously or via lucid dreaming, deep meditation, or use of psychotropics. Proponents of astral projection maintain that their consciousness or soul has transferred into an astral body (or "double"), which moves in tandem with the physical body in a parallel world known as the astral plane.

- Yes
- No

**084. Do you personally possess the ability of, or have personally experienced astral projection?
(Please Answer Both Parts)**

- Yes - Personal Ability
- No - Personal Ability

- Yes - Personal Experience
- No - Personal Experience

085. To the best of your recollection, have you ever had an out-of-body experience?

An out-of-body experience (OBE) typically involves a sensation of floating outside of one's body and, in some cases, seeing one's physical body from outside oneself

- Yes
- No

086. Are you aware of any relatives in your family that identify themselves as natural or practicing energy manipulators?

- Yes
- No

087. Are you aware of any relatives in your family that identify themselves as practicing shamans or witches?

- Yes
- No

088. Are there any relatives in your family that you believe may be natural witches or energy manipulators?

- Yes
- No

089. Are you aware of any relatives in your family that identify themselves as vampires?

- Yes
- No

090. Are there any relatives in your family that you believe may be vampires?

- Yes
- No

091. If yes to any question from 086 to 090, which side of your family has the greatest number of self-identified or suspected relatives?

- Paternal (Father)
- Maternal (Mother)

092. Are you aware of a family history of psychokinesis or telekinesis?

Psychokinesis ("mind-movement") or PK is the more commonly used term today for what in the past was known as telekinesis ("distant-movement"). It refers to the psi ability to influence the behavior of matter by mental intention (or possibly some other aspect of mental activity) alone.

- Yes
- No

093. Do you personally possess the ability of, or have personally experienced psychokinesis or telekinesis? (Please Answer Both Parts)

- Yes - Personal Ability
- No - Personal Ability

- Yes - Personal Experience
- No - Personal Experience

094. Are you aware of a family history of psychometry?

Psychometry is a psi (or psychic) ability in which the user is able to relate details about the past condition of an object or area, usually by being in close contact with it.

- Yes
- No

095. Do you personally possess the ability of, or have personally experienced psychometry? (Please Answer Both Parts)

- Yes - Personal Ability
- No - Personal Ability

- Yes - Personal Experience
- No - Personal Experience

096. Are you aware of a family history of pyrokinesis?

Pyrokinesis is the postulated psi ability to excite the atoms within an object, possibly creating enough energy to ignite the object.

- Yes
- No

**097. Do you personally possess the ability of, or have personally experienced pyrokinesis?
(Please Answer Both Parts)**

- Yes - Personal Ability
- No - Personal Ability

- Yes - Personal Experience
- No - Personal Experience

098. Can you perceive other's auras?

An aura is an energy field around an object, plant, animal, or person. It contains information about the health of an organism, its emotional and mental state, and many other things. Color, texture, shape, size, and motion of the aura all provide information about the organism or object.

- Yes - Some Persons
- Yes - Most Persons
- Yes - All Persons
- No

099. Do you consider yourself an empath?

Empathy in this context is defined as a paranormal or psychic ability to sense the emotions of others, often manifesting these emotions into physical or psychological changes within oneself or even broadcasting selected emotions to others.

- Yes
- No

100. How often are you told by someone else that you have "read their mind" after a later coincidental revelation or duplication in idea / action?

- Very Often
- Fairly Often
- Occasionally
- Rarely
- Never
- Not Applicable

101. To the best of your recollection, have you ever experienced lucid dreaming?

Lucid dreaming is the conscious perception of one's state while dreaming, enabling a more cogent ("lucid") control over the content and quality of the experience. The complete experience from start to finish is a lucid dream.

- Yes
- No

102. To the best of your recollection, have you ever dream walked?

Dream walking involves the physical action of interacting with others while they are dreaming. The dream walker may either be asleep or in some instances awake while this occurs.

- Yes
- No

103. To the best of your recollection, have you ever suffered from sleep paralysis (“Old Hag Effect”)?

Sleep paralysis occurs when the brain is awakened from an REM state into essentially a normal fully awake state, but the bodily paralysis is still occurring. This causes the person to be fully aware, but unable to move. In addition, this state is usually accompanied by certain specific kinds of hallucinations. This state usually lasts no more than two minutes before a person is able to either return to full REM sleep or to become fully awake, though the sense of how much time has gone by is often distorted during sleep paralysis.

- Yes
- No

104. To the best of your recollection, have you ever experienced prophetic dreams?

Prophetic dreaming are dreams that involve the prediction or experience of future events.

- Yes
- No

**105. Have any of the following appeared to you in either visions or personal dreams?
(Check All That Apply)**

- | | |
|---|---|
| <input type="checkbox"/> Astrological Symbols | <input type="checkbox"/> Hermetic Symbols |
| <input type="checkbox"/> Blood | <input type="checkbox"/> Hieroglyphic Symbols |
| <input type="checkbox"/> Cats (Large Or Small) | <input type="checkbox"/> Other Unfamiliar Symbols |
| <input type="checkbox"/> Cuneiform Symbols | <input type="checkbox"/> Paintings On Walls |
| <input type="checkbox"/> Goetic Symbols (Keys Of Solomon) | <input type="checkbox"/> None Of The Above |

106. If yes, have any of these visions or dreams been recurring?

- Yes
- No
- Not Applicable

107. Have you ever woken from sleep with the taste of blood in your mouth without finding any physical evidence of cuts or blood present?

- Yes
- No

108. To the best of your recollection, have you ever experienced a psychic connection with someone either living or dead?

- Yes
- No

109. To the best of your recollection, have you ever experienced a poltergeist?

*A **poltergeist** is widely described as an invisible ghost that interacts with others by moving and influencing inanimate objects. Stories featuring poltergeists typically focus heavily on raps, thumps, knocks, footsteps, and bed-shaking, all without a discernable point of origin.*

- Yes
- No

110. To the best of your recollection, have you ever experienced an encounter with a non-living spiritual entity?

- Yes
- No

111. Have you ever engaged in psychic attacks on others?

*Any type of unwelcome paranormal or ethereal intrusion intended to cause harm or disruption to the recipient. Psychic vampire feedings are considered by some a form of **psychic attack**, especially when forced upon an unwilling victim.*

- Yes
- No

112. Do you practice shielding techniques?

*A **shield** is a bubble of energy that works just like a fence or a traditional physical shield. It can be used to screen the energy that moves through it, to keep out unwanted energy, to keep in energy, and to defend against someone else's negative energy.*

- Yes
- No

113. Do you practice grounding techniques?

***Grounding** means connecting your energy and flow of energy to the earth in a stable, secure way. It allows you to get rid of unwanted energy, while taking in clean, balanced energy.*

- Yes
- No

114. Do you practice centering techniques?

Centering means finding your own identity and essence, separate from the influences of societal expectations and pressures. It can enhance shielding, and if done well, can remove the need for shields entirely. It allows you to perceive your own energy, others' energy, and the energy of your environment clearly.

- Yes
- No

115. To the best of your recollection, have you ever experienced déjà vu?

The term *déjà vu* describes the experience of feeling that one has witnessed or experienced a new situation previously.

- Yes
- No

116. How often do you experience déjà vu?

- | | |
|---------------------------------------|---|
| <input type="checkbox"/> Very Often | <input type="checkbox"/> Rarely |
| <input type="checkbox"/> Fairly Often | <input type="checkbox"/> Never |
| <input type="checkbox"/> Occasionally | <input type="checkbox"/> Not Applicable |

117. Do you believe in magick?

Magic / Magick (as coined by Aleister Crowley) or sorcery are terms referring to the alleged influencing of events and physical phenomena by supernatural, mystical, or paranormal means.

- Yes
- No

118. Do you believe in reincarnation?

Reincarnation, literally to be made flesh again, as a doctrine or mystical belief, holds the notion that one's 'Spirit' ('Soul' depending on interpretation), 'Higher or True Self', 'Divine Spark', 'I' or 'Ego' (not to be confused with the ego as defined by psychology) or critical parts of these returns to the material world after physical death to be reborn in a new body.

- Yes
- No

119. Do you believe your spirit has existed in a former lifetime?

- Yes
- No

120. If yes, to which historical time period(s) do you attribute this past life? (Check All That Apply)

- Prehistoric
- Stone Age
- Copper Age
- Iron Age
- Ancient Egypt (3200 to 30 BC)
- Ancient Greece (1000 BC)
- Pax Romana (Antonine Dynasty 96 - 180)
- Three Kingdoms (China 220 - 280)
- Middle Ages (Europe 5th - 15th Century)
- Viking Age (Scandinavia 793 - 1066)
- Nara Period (Japan 709 - 795)
- Five Dynasties & Ten Kingdoms (China 907 - 960)
- Sengoku Period (Japan 1478 - 1605)
- Renaissance Period (Europe 14th - 16th Century)
- Early Modern (Europe 14th - 18th Century)
- Elizabethan Period (United Kingdom 1558 - 1603)
- The Reformation (Europe 16th Century)
- The Age Of Enlightenment (Europe 18th Century)
- Modern (Europe 18th - 20th Century)
- French & Indian War Period (1754 - 1763)
- American Revolutionary War Period (1775 - 1783)
- Industrial Revolution (Europe 18th - 19th Century)
- Napoleonic Era (1799 - 1815)
- Victorian Era (United Kingdom 1837 - 1901)
- Edwardian Period (United Kingdom 1901 - 1910)
- American Western Frontier / Gold Rush Era (1865 - 1889)
- Meiji Era (Japan 1868 - 1912)
- World War I (1914 - 1918)
- Interwar Period (1918 - 1937)
- World War II (1937 - 1945)
- Post 1945
- Other: _____
- Not Applicable

121. If you have experienced glimpses or visions of a past life please briefly describe the details of that past life and the surrounding environment or reoccurring themes.

_____ < Multiple Line Field - Use As Much Space As Needed >

- Not Applicable

Personal Culture & Environment

122. In which sector are you currently employed?

- | | |
|---|---|
| <input type="checkbox"/> Advertising / Marketing / PR | <input type="checkbox"/> Media / Publishing / Entertainment |
| <input type="checkbox"/> Aerospace | <input type="checkbox"/> Medical / Health Services |
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Military |
| <input type="checkbox"/> Automotive | <input type="checkbox"/> Pharmaceuticals |
| <input type="checkbox"/> Computers / Electronics | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Retail |
| <input type="checkbox"/> Consumer Goods | <input type="checkbox"/> Services |
| <input type="checkbox"/> Education / Student | <input type="checkbox"/> Telecommunications / Networking |
| <input type="checkbox"/> Energy / Mining | <input type="checkbox"/> Travel / Transportation |
| <input type="checkbox"/> Finance / Insurance | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Government / Public Service | <input type="checkbox"/> I Don't Work |
| <input type="checkbox"/> Hospitality / Recreation | <input type="checkbox"/> Unemployed |
| <input type="checkbox"/> Manufacturing | |

123. To what types of music do you listen? (Check All That Apply)

- | | |
|--|--|
| <input type="checkbox"/> Alternative | <input type="checkbox"/> Heavy Metal |
| <input type="checkbox"/> Ambient / Drone | <input type="checkbox"/> Hip Hop |
| <input type="checkbox"/> Americana | <input type="checkbox"/> Industrial |
| <input type="checkbox"/> Baroque | <input type="checkbox"/> Jazz |
| <input type="checkbox"/> Big Band / Swing | <input type="checkbox"/> New Age |
| <input type="checkbox"/> Black Metal | <input type="checkbox"/> New Wave |
| <input type="checkbox"/> Blue Grass | <input type="checkbox"/> Nineties |
| <input type="checkbox"/> Blues | <input type="checkbox"/> Oldies |
| <input type="checkbox"/> Celtic | <input type="checkbox"/> Opera |
| <input type="checkbox"/> Chamber | <input type="checkbox"/> Operetta |
| <input type="checkbox"/> Classic R&B | <input type="checkbox"/> Piano / Instrumental |
| <input type="checkbox"/> Classic Rock | <input type="checkbox"/> Pop |
| <input type="checkbox"/> Classical | <input type="checkbox"/> Punk Rock |
| <input type="checkbox"/> Country | <input type="checkbox"/> R&B |
| <input type="checkbox"/> Death Metal | <input type="checkbox"/> Rap |
| <input type="checkbox"/> Eighties | <input type="checkbox"/> Reggae |
| <input type="checkbox"/> Electronica / EBM | <input type="checkbox"/> Rock |
| <input type="checkbox"/> EMO | <input type="checkbox"/> Seventies |
| <input type="checkbox"/> Folk | <input type="checkbox"/> Show Tunes |
| <input type="checkbox"/> Funk | <input type="checkbox"/> Spiritual / Inspirational |
| <input type="checkbox"/> Gothic | <input type="checkbox"/> Other: _____ |

124. What types of clothes do you typically wear in a social setting with peers (outside of the work place)? (Check All That Apply)

- | | |
|--|--|
| <input type="checkbox"/> Athletic / Sweats | <input type="checkbox"/> Medieval Style |
| <input type="checkbox"/> Black / Dark Colors | <input type="checkbox"/> Neo-Gothic Style |
| <input type="checkbox"/> Business Casual | <input type="checkbox"/> Renaissance Style |
| <input type="checkbox"/> Dress / Suit | <input type="checkbox"/> Romantic Style |
| <input type="checkbox"/> Fetish / Rubber / Leather | <input type="checkbox"/> White / Bright Colors |
| <input type="checkbox"/> Jeans / T-Shirt | <input type="checkbox"/> Other: _____ |

125. Which of the following pets do you own or have owned in the past 10 years? (Check All That Apply)

- | | |
|--------------------------------|--|
| <input type="checkbox"/> Bird | <input type="checkbox"/> Insects |
| <input type="checkbox"/> Cat | <input type="checkbox"/> Reptile |
| <input type="checkbox"/> Dog | <input type="checkbox"/> Rodents |
| <input type="checkbox"/> Fish | <input type="checkbox"/> Exotic / Other: _____ |
| <input type="checkbox"/> Horse | <input type="checkbox"/> None |

126. How often do you engage in exercise outside of work or recreational sports?

- | | |
|---|---|
| <input type="checkbox"/> More Than Once A Day | <input type="checkbox"/> About Once A Month |
| <input type="checkbox"/> Almost Every Day | <input type="checkbox"/> Less Than Once A Month |
| <input type="checkbox"/> A Few Times A Week | <input type="checkbox"/> A Few Times A Year |
| <input type="checkbox"/> About Once A Week | <input type="checkbox"/> Once A Year Or Less |
| <input type="checkbox"/> Two Or Three Times A Month | <input type="checkbox"/> Rarely If Ever |

127. At which of the following sports or activities do you personally have moderate to highly developed skills? (Check All That Apply)

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Archery | <input type="checkbox"/> Martial Arts |
| <input type="checkbox"/> Billiards | <input type="checkbox"/> Sword Fighting |
| <input type="checkbox"/> Chess | <input type="checkbox"/> Target Shooting |
| <input type="checkbox"/> Darts | <input type="checkbox"/> None |
| <input type="checkbox"/> Fencing | |

128. Do you play a musical instrument?

- Yes
 No

129. How many languages do you either speak, understand spoken, and/or write proficiently?

- | | |
|----------------------------|--------------------------------------|
| <input type="checkbox"/> 1 | <input type="checkbox"/> 4 |
| <input type="checkbox"/> 2 | <input type="checkbox"/> 5 |
| <input type="checkbox"/> 3 | <input type="checkbox"/> More Than 5 |

130. How would you classify your overall social political temperament?

- Conservative Moderate Liberal

131. In which setting do you feel more comfortable?

- Large Group Interactions Or Social Discourse
- One-On-One Interactions Or Social Discourse
- Equally Comfortable In Both Settings

132. Have you ever devoted a significant portion of your time to the study of magick, demonology, or the occult?

- Yes
- No

133. Do you have any tattoos?

- Yes
- No

134. If yes, what is the theme of the majority of your tattoos?

- Mainly Artistic
- Mainly Spiritual
- Not Applicable

135. Do you have any piercings (other than your ears)?

- Yes
- No

136. Do you have any major artificially induced body modifications?

- Yes
- No

137. Do you consider yourself Goth?

- Yes
- No

138. Have you ever attended a Society for Creative Anachronism (SCA), Live Action Role Playing (LARP), Renaissance, or other similarly related cultural event or festival?

- Yes
- No

139. If yes, how often do you attend these events?

- | | |
|---|--|
| <input type="checkbox"/> Once Every 2 Years | <input type="checkbox"/> 8 - 12 Times Yearly |
| <input type="checkbox"/> Once Yearly | <input type="checkbox"/> More Than 12 Times Yearly |
| <input type="checkbox"/> 2 - 4 Times Yearly | <input type="checkbox"/> Very Rarely |
| <input type="checkbox"/> 4 - 8 Times Yearly | <input type="checkbox"/> Not Applicable |

140. Have you ever attended science-fiction, fantasy, comic, or role-playing conventions?

- Yes
- No

141. If yes, how often do you attend these conventions?

- | | |
|---|--|
| <input type="checkbox"/> Once Every 2 Years | <input type="checkbox"/> 8 - 12 Times Yearly |
| <input type="checkbox"/> Once Yearly | <input type="checkbox"/> More Than 12 Times Yearly |
| <input type="checkbox"/> 2 - 4 Times Yearly | <input type="checkbox"/> Very Rarely |
| <input type="checkbox"/> 4 - 8 Times Yearly | <input type="checkbox"/> Not Applicable |

142. Do you engage in Sadomasochistic (S&M) activities?

- Yes
- No

143. Are you involved in any club that engages in blood play?

- Yes
- No

144. Have you ever been convicted of a violent crime?

- Yes
- No

145. If yes, what kind? (Check All That Apply)

- | | |
|---|---|
| <input type="checkbox"/> Aggravated Assault | <input type="checkbox"/> Simple Battery |
| <input type="checkbox"/> Murder | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Rape | <input type="checkbox"/> Not Applicable |
| <input type="checkbox"/> Robbery | |

146. Have you ever been a victim of a violent crime?

- Yes
- No

147. If yes, what kind? (Check All That Apply)

- | | |
|---|---|
| <input type="checkbox"/> Aggravated Assault | <input type="checkbox"/> Simple Battery |
| <input type="checkbox"/> Attempted Murder | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Rape | <input type="checkbox"/> Not Applicable |
| <input type="checkbox"/> Robbery | |

148. Have you ever exhibited violent tendencies towards animals outside of hunting or self-defense?

- Yes
- No

149. If yes, did this violence result in the death of the animal?

- Yes
- No
- Not Applicable

150. Have you ever been a victim of discrimination based on your personal lifestyle?

- Yes
- No

151. To the best of your recollection, did you ever suffer either physical or sexual abuse as a child?

- | | |
|---|-------------------------------------|
| <input type="checkbox"/> Yes - Physical | <input type="checkbox"/> Yes - Both |
| <input type="checkbox"/> Yes - Sexual | <input type="checkbox"/> No |

152. How would you classify the collective quality of your adulthood romantic relationships?

- | | |
|------------------------------------|-------------------------------|
| <input type="checkbox"/> Excellent | <input type="checkbox"/> Fair |
| <input type="checkbox"/> Very Good | <input type="checkbox"/> Poor |
| <input type="checkbox"/> Good | |

153. In the majority of adulthood romantic relationships or marriages that ended the primary person initiating the split was...

- | | |
|-------------------------------------|---|
| <input type="checkbox"/> Myself | <input type="checkbox"/> Equally Mixed |
| <input type="checkbox"/> My Partner | <input type="checkbox"/> Not Applicable |

Spiritual Beliefs

154. Do you associate yourself with any particular faith, discipline, paradigm (spiritual / fraternal), or religion?

- Yes
 No

155. If yes, which faith, discipline, paradigm (spiritual / fraternal), or religion do you identify with?
(Check All That Apply)

- | | |
|---|--|
| <input type="checkbox"/> Agnostic/Atheist/Secular/Humanist/Irreligious | <input type="checkbox"/> Hermeticism |
| <input type="checkbox"/> African Syncretic (Voodoo/Vodoun/Hoodoo/Santeria/ Lukumi/Candomble/Palo Mayombe) | <input type="checkbox"/> Hinduism |
| <input type="checkbox"/> Buddhism - Theravada | <input type="checkbox"/> Islam |
| <input type="checkbox"/> Buddhism - Mahayana | <input type="checkbox"/> Jainism |
| <input type="checkbox"/> Cainus Lupus | <input type="checkbox"/> Juche |
| <input type="checkbox"/> Cao Dai | <input type="checkbox"/> Judaism |
| <input type="checkbox"/> Christianity | <input type="checkbox"/> Kheprianism |
| * <input type="checkbox"/> Anabaptist | <input type="checkbox"/> Luciferianism |
| * <input type="checkbox"/> Anglican | <input type="checkbox"/> Magick (Chaos / Enochian / Grimoire / Goetic) |
| * <input type="checkbox"/> Baptist | <input type="checkbox"/> Mithrianism / Kalistree |
| * <input type="checkbox"/> Catholic | <input type="checkbox"/> Mysticism (Kabbalah / Rosicrucian / Sufism) |
| * <input type="checkbox"/> Charismatic | <input type="checkbox"/> Native American Mythology |
| * <input type="checkbox"/> Eastern Orthodox | <input type="checkbox"/> Neo-Druidism |
| * <input type="checkbox"/> Evangelical | <input type="checkbox"/> Neo-Paganism |
| * <input type="checkbox"/> Jehovah's Witness | <input type="checkbox"/> Occultism |
| * <input type="checkbox"/> Lutheran | <input type="checkbox"/> Rastafarianism |
| * <input type="checkbox"/> Methodist | <input type="checkbox"/> Reiki |
| * <input type="checkbox"/> Mormon | <input type="checkbox"/> Satanism (LaVayen) |
| * <input type="checkbox"/> Oriental Orthodox | <input type="checkbox"/> Scientology |
| * <input type="checkbox"/> Pentecostal | <input type="checkbox"/> Sekhrian |
| * <input type="checkbox"/> Presbyterian | <input type="checkbox"/> Setianism / Temple Of Set |
| * <input type="checkbox"/> Protestant | <input type="checkbox"/> Shamanism |
| * <input type="checkbox"/> Reformed Protestant | <input type="checkbox"/> Shinto |
| * <input type="checkbox"/> Seventh-Day Adventist | <input type="checkbox"/> Sikhism |
| * <input type="checkbox"/> Unitarian | <input type="checkbox"/> Spiritism |
| <input type="checkbox"/> Confucianism | <input type="checkbox"/> Temple Of The Vampire |
| <input type="checkbox"/> Daoism / Taoism | <input type="checkbox"/> Tenrikyo |
| <input type="checkbox"/> Deism | <input type="checkbox"/> Thelema (O.T.O / Argenteum Astrum) |
| <input type="checkbox"/> Demonolatry | <input type="checkbox"/> Theosophy |
| <input type="checkbox"/> Discordianism | <input type="checkbox"/> Tiamantis |
| <input type="checkbox"/> Divination | <input type="checkbox"/> Unitarian Universalism |
| <input type="checkbox"/> Dragon Rouge | <input type="checkbox"/> Wicca |
| <input type="checkbox"/> Freemasonry / Knights Templar | <input type="checkbox"/> Zoroastrianism / Mazdaism |
| <input type="checkbox"/> Gnosticism | <input type="checkbox"/> Other: _____ |
| | <input type="checkbox"/> Not Applicable |

**156. Which faith, discipline, paradigm (spiritual / fraternal), or religion do you identify with the most?
(Check Only One)**

- | | |
|---|--|
| <input type="checkbox"/> Agnostic/Atheist/Secular/Humanist/Irreligious | <input type="checkbox"/> Hermeticism |
| <input type="checkbox"/> African Syncretic (Voodoo/Vodoun/Hoodoo/Santeria/ Lukumi/Candomble/Palo Mayombe) | <input type="checkbox"/> Hinduism |
| <input type="checkbox"/> Buddhism - Theravada | <input type="checkbox"/> Islam |
| <input type="checkbox"/> Buddhism - Mahayana | <input type="checkbox"/> Jainism |
| <input type="checkbox"/> Cainus Lupus | <input type="checkbox"/> Juche |
| <input type="checkbox"/> Cao Dai | <input type="checkbox"/> Judaism |
| <input type="checkbox"/> Christianity | <input type="checkbox"/> Kheprianism |
| * <input type="checkbox"/> Anabaptist | <input type="checkbox"/> Luciferianism |
| * <input type="checkbox"/> Anglican | <input type="checkbox"/> Magick (Chaos / Enochian / Grimoire / Goetic) |
| * <input type="checkbox"/> Baptist | <input type="checkbox"/> Mithrianism / Kalistree |
| * <input type="checkbox"/> Catholic | <input type="checkbox"/> Mysticism (Kabbalah / Rosicrucian / Sufism) |
| * <input type="checkbox"/> Charismatic | <input type="checkbox"/> Native American Mythology |
| * <input type="checkbox"/> Eastern Orthodox | <input type="checkbox"/> Neo-Druidism |
| * <input type="checkbox"/> Evangelical | <input type="checkbox"/> Neo-Paganism |
| * <input type="checkbox"/> Jehovah's Witness | <input type="checkbox"/> Occultism |
| * <input type="checkbox"/> Lutheran | <input type="checkbox"/> Rastafarianism |
| * <input type="checkbox"/> Methodist | <input type="checkbox"/> Reiki |
| * <input type="checkbox"/> Mormon | <input type="checkbox"/> Satanism (LaVayen) |
| * <input type="checkbox"/> Oriental Orthodox | <input type="checkbox"/> Scientology |
| * <input type="checkbox"/> Pentecostal | <input type="checkbox"/> Sekhrian |
| * <input type="checkbox"/> Presbyterian | <input type="checkbox"/> Setianism / Temple Of Set |
| * <input type="checkbox"/> Protestant | <input type="checkbox"/> Shamanism |
| * <input type="checkbox"/> Reformed Protestant | <input type="checkbox"/> Shinto |
| * <input type="checkbox"/> Seventh-Day Adventist | <input type="checkbox"/> Sikhism |
| * <input type="checkbox"/> Unitarian | <input type="checkbox"/> Spiritism |
| <input type="checkbox"/> Confucianism | <input type="checkbox"/> Temple Of The Vampire |
| <input type="checkbox"/> Daoism / Taoism | <input type="checkbox"/> Tenrikyo |
| <input type="checkbox"/> Deism | <input type="checkbox"/> Thelema (O.T.O / Argenteum Astrum) |
| <input type="checkbox"/> Demonolatry | <input type="checkbox"/> Theosophy |
| <input type="checkbox"/> Discordianism | <input type="checkbox"/> Tiamantis |
| <input type="checkbox"/> Divination | <input type="checkbox"/> Unitarian Universalism |
| <input type="checkbox"/> Dragon Rouge | <input type="checkbox"/> Wicca |
| <input type="checkbox"/> Freemasonry / Knights Templar | <input type="checkbox"/> Zoroastrianism / Mazdaism |
| <input type="checkbox"/> Gnosticism | <input type="checkbox"/> Other: _____ |
| | <input type="checkbox"/> Not Applicable |

157. If you identify with multiple faiths, disciplines, paradigms (spiritual / fraternal), or religions please describe the synchronicity or philosophical blending of your beliefs below:

_____ < Multiple Line Field - Use As Much Space As Needed >

- Not Applicable

158. Do you personally hold a belief of religious pluralism?

*People with **pluralist** beliefs make no distinction between faith systems, viewing each one as valid within a particular culture*

- Yes
- No

159. Do you personally hold a belief of religious exclusivism?

*People with **exclusivist** beliefs typically explain other religions as either in error, or as corruptions or counterfeits of the true faith.*

- Yes
- No

160. Do you personally hold a belief of religious inclusivism?

*People with **inclusivist** beliefs recognize some truth in all faith systems, highlighting agreements and minimizing differences, but see their own faith as in some way ultimate.*

- Yes
- No

161. Do you personally hold a belief of religious syncretism?

*People with **syncretistic** views blend the views of a variety of different religions or traditional beliefs into a unique fusion which suits their particular experience and context.*

- Yes
- No

162. Do you attend either formal or informal religious or faith services?

- Yes
- No

163. If yes, how often do you attend services?

- | | |
|--|--|
| <input type="checkbox"/> More Than Once Daily | <input type="checkbox"/> Monthly |
| <input type="checkbox"/> Once Daily | <input type="checkbox"/> Less Than 6 Times Yearly |
| <input type="checkbox"/> More Than Once Weekly | <input type="checkbox"/> Only On Special Occasions or Holidays |
| <input type="checkbox"/> Once Weekly | <input type="checkbox"/> Not Applicable |

164. If yes, what type of services do you attend? (Check All That Apply)

- | | |
|--|---|
| <input type="checkbox"/> Church / Chapel / Worship | <input type="checkbox"/> Temple |
| <input type="checkbox"/> Mass | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Prayer Study / Teaching | <input type="checkbox"/> Not Applicable |
| <input type="checkbox"/> Rituals / Ceremonies | |
| <input type="checkbox"/> Synagogue | |

165. Are you descended within three generations from tribal peoples such as Native American or South American Tribes, India, Celtic, African, Arab, or an Asian tribe that currently still practice tribal customs?

- Yes
- No

166. Do you attend any tribal worship or do you follow a particular tribe's faith such as: Massai, Cherokee, Blackfoot/Kickapoo, Carribean, or African?

- Yes
- No

167. Do you believe in the existence of a monotheistic deity or one God (god)?

- Yes
- No

168. Do you ever struggle with your own spirituality and belief system as it relates to the nature of your vampirism?

- Yes
- No
- Not Applicable

169. Do you consider yourself to have a pronounced dark nature?

- Yes
- No

170. Do you acknowledge the existence of Otherkin?

Otherkin is a subculture made up of people who describe themselves as being non-human in some way, sometimes believing themselves to be mythological or legendary creatures. Most otherkin believe that they have non-human aspects that are either spiritual or philosophical in nature. Some otherkin claim that they are human in a physical sense, but non-human in a mental or spiritual one. Still others believe themselves to be biologically non-human with a direct relation to the species they associate themselves with or descended from that species.

- Yes
- No

* Optional: If yes, which of the above explanations of Otherkin do you agree with?

_____ < Multiple Line Field - Use As Much Space As Needed >

171. If yes, which types of Otherkin and other various subclasses do you believe exist? (Check All That Apply)

- | | |
|--|--|
| <input type="checkbox"/> Ancients / Reincarnates | <input type="checkbox"/> Pegasus |
| <input type="checkbox"/> Angelics / Angels | <input type="checkbox"/> Phoenix |
| <input type="checkbox"/> Demonics / Demons | <input type="checkbox"/> Star Seeds / Andromedians |
| <input type="checkbox"/> Dragons | <input type="checkbox"/> Therians |
| <input type="checkbox"/> Elves | <input type="checkbox"/> Unicorns |
| <input type="checkbox"/> Fae / Fairies | <input type="checkbox"/> Vampires |
| <input type="checkbox"/> Gargoyles | <input type="checkbox"/> Watchers |
| <input type="checkbox"/> Gryphons | <input type="checkbox"/> Werewolves |
| <input type="checkbox"/> Guardians | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Lightworkers / Oracles | <input type="checkbox"/> Not Applicable |

172. Which types of Otherkin do you consider yourself to be? (Check All That Apply)

- | | |
|--|--|
| <input type="checkbox"/> Ancient / Reincarnate | <input type="checkbox"/> Pegasus |
| <input type="checkbox"/> Angelic / Angel | <input type="checkbox"/> Phoenix |
| <input type="checkbox"/> Demonic / Demon | <input type="checkbox"/> Star Seed / Andromedian |
| <input type="checkbox"/> Dragon | <input type="checkbox"/> Therian |
| <input type="checkbox"/> Elf | <input type="checkbox"/> Unicorn |
| <input type="checkbox"/> Fae / Fairy | <input type="checkbox"/> Vampire |
| <input type="checkbox"/> Gargoyle | <input type="checkbox"/> Watcher |
| <input type="checkbox"/> Gryphon | <input type="checkbox"/> Werewolf |
| <input type="checkbox"/> Guardian | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Lightworker / Oracle | <input type="checkbox"/> None |

173. Do you believe in the existence of either Indigo or Crystal Children / Adults?

Indigo Children is a term used to refer to a set of children having certain special psychological and spiritual attributes. The indigo child concept was first publicized by the book *The Indigo Children*, written by Lee Carroll and Jan Tober. The adjective "indigo" is used because it is claimed these children appear to have an indigo-hued aura.

Characteristics Of Indigo Children:

- They come into the world with a feeling of royalty (and often act like it)
- They have a feeling of "deserving to be here", and are surprised when others don't share that.
- Self-worth is not a big issue. They often tell the parents "who they are."
- They have difficulty with absolute authority (authority without explanation or choice).
- They simply will not do certain things; for example, waiting in line is difficult for them.
- They get frustrated with systems that are ritually oriented and don't require creative thought.
- They often see better ways of doing things, both at home and in school, which makes them seem like "system busters" (nonconforming to any system).
- They seem antisocial unless they are with their own kind. If there are no others of like consciousness around them, they often turn inward, feeling like no other human understands them. School is often extremely difficult for them socially.
- They will not respond to "guilt" discipline ("Wait till your father gets home and finds out what you did").
- They are not shy in letting you know what they need.

Source: *The Indigo Children*; Lee Carroll & Jan Tober

Crystal Children is a term similar to that of indigo children but these children are purported to be extremely powerful psychics whose main purpose is to take humanity to the next level of our evolution, reveal to us our inner power and divinity. They often function in groups rather than as individuals and share a unity consciousness as well as being awakened from birth. Crystal children are claimed to have an opalescent aura of multi-color pastel hues.

- Yes - Indigo
- Yes - Crystal

- Yes - Both
- No

Awakening

*An **Awakening** is the physical, spiritual, and mental changes that occur when someone becomes aware (for the purpose of this study) of their latent vampire nature.*

174. Do you believe that everyone is capable of awakening or that only certain persons can ever accomplish this?

- Everyone
- Limited Individuals
- Not Applicable

175. An awakening is a process that occurs throughout one's lifetime; not a temporary state of transition:

- Completely Agree
- Generally Agree
- Generally Disagree
- Completely Disagree

176. Do you consider yourself having been awakened or partially awakened from birth?

- Yes
- No
- Not Applicable

177. To the best of your recollection, did you experience enhanced psychic sensitivities as a child?

- Yes
- No

178. To the best of your recollection, did you have dreams of past lives as a child?

- Yes
- No

179. To the best of your recollection, did you have an awareness of being a vampire as a child?

- Yes
- No
- Not Applicable

180. At what age did you become physically awakened?

- Specific Age: _____
- Under 14 Years Of Age
- 14 - 15 Years Of Age
- 16 - 17 Years Of Age
- 18 - 19 Years Of Age
- 20 - 24 Years Of Age
- 25 - 29 Years Of Age
- 30 - 34 Years Of Age
- 34 - 39 Years Of Age
- 40 - 44 Years Of Age
- 45 - 49 Years Of Age
- 50 - 54 Years Of Age
- Over 54 Years Of Age
- Not Applicable

181. Approximately what year did this occur?

Year: _____

Not Applicable

182. At what age did you become emotionally / mentally awakened?

- Specific Age: _____
- Under 14 Years Of Age
- 14 - 15 Years Of Age
- 16 - 17 Years Of Age
- 18 - 19 Years Of Age
- 20 - 24 Years Of Age
- 25 - 29 Years Of Age

- 30 - 34 Years Of Age
- 35 - 39 Years Of Age
- 40 - 44 Years Of Age
- 45 - 49 Years Of Age
- 50 - 54 Years Of Age
- Over 54 Years Of Age
- Not Applicable

183. Approximately what year did this occur?

Year: _____

Not Applicable

184. At what age did you become spiritually awakened?

- Specific Age: _____
- Under 14 Years Of Age
- 14 - 15 Years Of Age
- 16 - 17 Years Of Age
- 18 - 19 Years Of Age
- 20 - 24 Years Of Age
- 25 - 29 Years Of Age

- 30 - 34 Years Of Age
- 35 - 39 Years Of Age
- 40 - 44 Years Of Age
- 45 - 49 Years Of Age
- 50 - 54 Years Of Age
- Over 54 Years Of Age
- Not Applicable

185. Approximately what year did this occur?

Year: _____

Not Applicable

186. Did emotional / mental and spiritual awakening occur at the same time?

- Yes
- No
- Not Applicable

187. If no, how far apart did they occur?

- Weeks
- Months
- 1 Year
- 2 Years

- 3 Years
- 4 Years
- 5 Or More Years
- Not Applicable

188. If they did not occur at the same time, which occurred first?

- Emotional / Mental Awakening
- Spiritual Awakening
- Not Applicable

189. Did you have access to other awakened individuals or vampire community written relevant articles / resources during the time of your awakening?

- Yes - Awakened Individuals
- Yes - Awakening Articles / Resources
- Yes - Both
- No
- Not Applicable

190. Was another vampire involved in you awakening?

- Yes
- No
- Not Applicable

191. If yes, was this someone you met in the process or someone you had known beforehand while you were still in a latent state?

- Someone met during the awakening
- Someone known prior to the awakening
- Not Applicable

192. How far into your awakening was it before you interacted with another vampire?

- Immediately
- Days
- Weeks
- Months
- 1 Year
- 2 Years
- 3 Years Or More
- Not Applicable

193. Have you ever felt drawn to another person to whom you felt their psychic energy was similar to your own?

- Yes
- No

194. If yes, did that person later identify himself as a vampire as a result of that meeting?

- Yes
- No
- Not Applicable

195. Have you ever felt drawn to another person to whom you felt their psychic energy was dissimilar to your own?

- Yes
- No

196. If yes, did that person later identify himself as a vampire as a result of that meeting?

- Yes
- No
- Not Applicable

197. Do you believe in the concept of innate or inborn psi ability in humans (humans born with natural psychic or psi abilities)?

- Yes
- No

**198. What, if any physical or psychological symptoms did you manifest during your awakening?
(Check All That Apply)**

- | | |
|---|---|
| <input type="checkbox"/> Agoraphobia | <input type="checkbox"/> Insomnia |
| <input type="checkbox"/> Changes In Food Cravings | <input type="checkbox"/> Mood Changes |
| <input type="checkbox"/> Claustrophobia | <input type="checkbox"/> Nightmares |
| <input type="checkbox"/> Depression | <input type="checkbox"/> Overall Increase In Sensitivity |
| <input type="checkbox"/> Desire To Seek Out Similar Individuals | <input type="checkbox"/> Photosensitivity |
| <input type="checkbox"/> Developed New Habits | <input type="checkbox"/> Psychic Sensitivities |
| <input type="checkbox"/> Disorientation | <input type="checkbox"/> Seeing Auras |
| <input type="checkbox"/> Dream Walking | <input type="checkbox"/> Seeing Energy Signatures |
| <input type="checkbox"/> Headaches | <input type="checkbox"/> Sleep Pattern Reversal (Night/Day) |
| <input type="checkbox"/> Increased Appetite | <input type="checkbox"/> Temperature Sensitivity |
| <input type="checkbox"/> Increased Creativity | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Increased Paranormal Experiences | <input type="checkbox"/> Not Applicable |

199. How frequently have you experienced suicidal thoughts or tendencies prior to your awakening?

- | | |
|---------------------------------------|---|
| <input type="checkbox"/> Very Often | <input type="checkbox"/> Rarely |
| <input type="checkbox"/> Fairly Often | <input type="checkbox"/> Never |
| <input type="checkbox"/> Occasionally | <input type="checkbox"/> Not Applicable |

200. How frequently have you experienced suicidal thoughts or tendencies after your awakening?

- | | |
|---------------------------------------|---|
| <input type="checkbox"/> Very Often | <input type="checkbox"/> Rarely |
| <input type="checkbox"/> Fairly Often | <input type="checkbox"/> Never |
| <input type="checkbox"/> Occasionally | <input type="checkbox"/> Not Applicable |

201. Was your awakening caused or catalyzed by a traumatic or near death experience?

- Yes
- No
- Not Applicable

202. In the space provided please describe the details of your awakening. Do NOT include responses of a personally identifiable nature or cite either historical or specific community entities or persons as a basis for your answer.

< Multiple Line Field - Use As Much Space As Needed >

Not Applicable

Knowledge

203. In your opinion, does the vampire community have an unwritten obligation to offer classes, exercises, or personal instruction for the newly awakened?

- Yes
 No

Without the aid of reference materials or outside assistance please answer the following six questions to the best of your ability: (Check Only One Per Question)

204. The following group of terms most aptly refer to:

| SHIELDING / ASTRAL / GROUNDING / PRANA / AURA / EMPATHY |

- Direct Feeding / Donor
 Guidelines / Rules / Structure
 Mythology / Fiction / Roleplay
 Occult / New Age
 Psi Abilities
 Vampire Lifestyle / Community

205. The following group of terms most aptly refer to:

| BLACK SWAN / VAMPING / TWOOFING / BEAST / COMMUNION |

- Direct Feeding / Donor
 Guidelines / Rules / Structure
 Mythology / Fiction / Roleplay
 Occult / New Age
 Psi Abilities
 Vampire Lifestyle / Community

206. The following group of terms most aptly refer to:

| BLACK VEIL / 13 PILLARS / SIN NOMINE / MUNDANE / INNER CHOIR |

- Direct Feeding / Donor
 Guidelines / Rules / Structure
 Mythology / Fiction / Roleplay
 Occult / New Age
 Psi Abilities
 Vampire Lifestyle / Community

207. The following group of terms most aptly refer to:

| **KINDRED / MASQUERADE / EMBRACE / CAIN / BOOK OF NOD** |

- Direct Feeding / Donor
- Guidelines / Rules / Structure
- Mythology / Fiction / Roleplay
- Occult / New Age
- Psi Abilities
- Vampire Lifestyle / Community

208. The following group of terms most aptly refer to:

| **CROWLEY / GEOMANCY / THELEMA / MAGICK / AGRIPPA** |

- Direct Feeding / Donor
- Guidelines / Rules / Structure
- Mythology / Fiction / Roleplay
- Occult / New Age
- Psi Abilities
- Vampire Lifestyle / Community

209. The following group of terms most aptly refer to:

| **TWILIGHT / NIGHTSIDE / BEACON / HALO / QUABAL** |

- Direct Feeding / Donor
- Guidelines / Rules / Structure
- Mythology / Fiction / Roleplay
- Occult / New Age
- Psi Abilities
- Vampire Lifestyle / Community

210. By which methods have you learned what you know to date about your vampiric nature or condition? (Check All That Apply)

- | | |
|--|---|
| <input type="checkbox"/> House Instruction | <input type="checkbox"/> Self Taught |
| <input type="checkbox"/> Mentor | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Online Research | <input type="checkbox"/> Not Applicable |

211. How would you rate the overall quality of information about the nature of real vampirism that is available online to the general public?

- | | |
|------------------------------------|-------------------------------|
| <input type="checkbox"/> Excellent | <input type="checkbox"/> Fair |
| <input type="checkbox"/> Very Good | <input type="checkbox"/> Poor |
| <input type="checkbox"/> Good | |

212. How would you rate the overall quality of in-print (books, magazine articles, scholarly journals, etc.) information about the nature of real vampirism that is written by non-community members?

- Excellent
- Very Good
- Good

- Fair
- Poor

213. How would you rate the overall quality of information about the nature of real vampirism that is available in print format that is written directly by members of the vampire community?

- Excellent
- Very Good
- Good

- Fair
- Poor

214. How would you rate the overall quality of information about the nature of real vampirism that is available to those who have chosen a solitary path in the vampire community?

- Excellent
- Very Good
- Good

- Fair
- Poor

215. Do you know who Elizabeth Bathory was?

- Yes
- No

216. Do you know who Vlad Tepes was?

- Yes
- No

217. How familiar are you with The Book Of Enoch?

- Very Familiar
- Somewhat Familiar

- Title Only
- Not At All

218. How familiar are you with the work, De Nugis Curialium by Walter Map?

- Very Familiar
- Somewhat Familiar

- Title / Author Only
- Not At All

219. Do you own any fictional vampire literature?

- Yes
- No

220. Do you own any non-fictional vampire literature?

- Yes
- No

221. Which of the following authors of vampire works are you familiar with? (Check All That Apply)

- | | |
|--|--|
| <input type="checkbox"/> Albert J. Bernstein | <input type="checkbox"/> Joe H. Slate |
| <input type="checkbox"/> Arlene Russo | <input type="checkbox"/> John Heinrich Zopft |
| <input type="checkbox"/> Barbara E. Hort | <input type="checkbox"/> Katherine Ramsland |
| <input type="checkbox"/> Christoph F. Demelius | <input type="checkbox"/> Konstantinos |
| <input type="checkbox"/> Collin de Plancy | <input type="checkbox"/> Lady CG |
| <input type="checkbox"/> Corvus Noctumum | <input type="checkbox"/> Martin V. Riccardo |
| <input type="checkbox"/> Daniel Cohen | <input type="checkbox"/> Michael Ranft |
| <input type="checkbox"/> David Farrant | <input type="checkbox"/> Michelle Belanger |
| <input type="checkbox"/> Dion Fortune | <input type="checkbox"/> Montague Summers |
| <input type="checkbox"/> Dom Augustin Calmet | <input type="checkbox"/> Norine Dresser |
| <input type="checkbox"/> Dorothy Harbour | <input type="checkbox"/> Paul Barber |
| <input type="checkbox"/> Dudley Wright | <input type="checkbox"/> Raven Kaldera |
| <input type="checkbox"/> Elizabeth Miller | <input type="checkbox"/> Rosemary Ellen Guiley |
| <input type="checkbox"/> Father Sebastian | <input type="checkbox"/> Ross Nichols |
| <input type="checkbox"/> Gerard Van Swieten | <input type="checkbox"/> Sir Richard F. Burton |
| <input type="checkbox"/> Giuseppe Davanzati | <input type="checkbox"/> Sondra London |
| <input type="checkbox"/> Jan L. Perkowski | <input type="checkbox"/> Stephen Kaplan |
| <input type="checkbox"/> J.CH. Harenberg | <input type="checkbox"/> Tony Thorne |
| <input type="checkbox"/> Jeff Guinn | <input type="checkbox"/> Viola Johnson |
| <input type="checkbox"/> J. Gordon Melton | <input type="checkbox"/> Other: _____ |

222. Which of the following works concerning vampires are you familiar with? (Check All That Apply)

- | | |
|--|--|
| <input type="checkbox"/> American Vampires: Fans, Victims, Practitioners | <input type="checkbox"/> The Vampire: His Kith & Kin |
| <input type="checkbox"/> Children Of The Night | <input type="checkbox"/> The Vampire Bible |
| <input type="checkbox"/> Dhampir, Child Of The Blood | <input type="checkbox"/> V |
| <input type="checkbox"/> Piercing The Darkness | <input type="checkbox"/> Vampires: The Occult Truth |
| <input type="checkbox"/> Practical Vampirism For Modern Vampyres | <input type="checkbox"/> Vampyre Almanac |
| <input type="checkbox"/> Psychic Vampire Codex | <input type="checkbox"/> Vampires Among Us |
| <input type="checkbox"/> Sanguinomicon | <input type="checkbox"/> Vampires Are |
| <input type="checkbox"/> Something In The Blood | <input type="checkbox"/> Vampire Nation |
| <input type="checkbox"/> The Romanian Folkloric Vampire | <input type="checkbox"/> Other: _____ |

223. Which of the following online vampire resources are you familiar with? (Check All That Apply)

- | | |
|---|---|
| <input type="checkbox"/> Bloodlines International | <input type="checkbox"/> Silken Shadows Vampire Community |
| <input type="checkbox"/> Current Of Elorath Forum | <input type="checkbox"/> Smoke & Mirrors Message Board |
| <input type="checkbox"/> Darkness Embraced Vampire & Occult Society | <input type="checkbox"/> SpynxCat's Real Vampire Support Page |
| <input type="checkbox"/> Drink Deeply & Dream | <input type="checkbox"/> The Order Of The Crimson Tongues |
| <input type="checkbox"/> Further Down The Rabbit Hole | <input type="checkbox"/> The Pranism Society |
| <input type="checkbox"/> Kheprian Forum | <input type="checkbox"/> The Psion Guild |
| <input type="checkbox"/> Pathway To Darkness | <input type="checkbox"/> The Vampire Don Henrie |
| <input type="checkbox"/> Sanguinarius: The Vampire Support Page | <input type="checkbox"/> Vampire Forums |
| <input type="checkbox"/> Sanguinox Vampire Forum | <input type="checkbox"/> Vampires Of Eternal Night |
| <input type="checkbox"/> ShadowLore | <input type="checkbox"/> Other: _____ |

Vampire Beliefs & Paths

224. Which of the following vampire paths are you familiar with? *(Check All That Apply)*

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Illuminati | <input type="checkbox"/> Temple Of The Vampire |
| <input type="checkbox"/> Kheprian | <input type="checkbox"/> Vampire Church |
| <input type="checkbox"/> Sanguinarium | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Quinotaur | <input type="checkbox"/> None |
| <input type="checkbox"/> Strigoi Vii | |

225. Which of the following vampire paths do you most closely identify with? *(Check Only One)*

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Illuminati | <input type="checkbox"/> Temple Of The Vampire |
| <input type="checkbox"/> Kheprian | <input type="checkbox"/> Vampire Church |
| <input type="checkbox"/> Sanguinarium | <input type="checkbox"/> A Solitary / Ronin Path |
| <input type="checkbox"/> Quinotaur | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Strigoi Vii | <input type="checkbox"/> None |

226. Which of the following vampire Houses, Clans, Covens, Havens, Orders, or Courts have you been previously aware of? *(Note: Both active and inactive entities as well as some duplications and alternate name spellings are listed.) (Check All That Apply)*

- | | |
|--|---|
| <input type="checkbox"/> Atlanta Vampire Alliance | <input type="checkbox"/> House Black Widow |
| <input type="checkbox"/> Blood Dragons | <input type="checkbox"/> House Cabal |
| <input type="checkbox"/> Bloodlines International | <input type="checkbox"/> House Chrysalis |
| <input type="checkbox"/> Carcus Covens | <input type="checkbox"/> House Clessidra Ligamentum |
| <input type="checkbox"/> CERC | <input type="checkbox"/> House Crescent Moon |
| <input type="checkbox"/> Church Of The Vampire | <input type="checkbox"/> House Crimson Blade |
| <input type="checkbox"/> Clan Dragonetti | <input type="checkbox"/> House Cyprean |
| <input type="checkbox"/> Clan Hidden Shadows | <input type="checkbox"/> House Dark Solace |
| <input type="checkbox"/> Clan Of Lilith | <input type="checkbox"/> House Dakkem |
| <input type="checkbox"/> Clan (House) Sabretooth | <input type="checkbox"/> House DarkHaven |
| <input type="checkbox"/> Countess Elizabeth's Vampire Coven (CEVC) | <input type="checkbox"/> House DarkStar |
| <input type="checkbox"/> Court Of Amen-Khepera | <input type="checkbox"/> House Della Noir |
| <input type="checkbox"/> Court Of Gotham | <input type="checkbox"/> House DeSalerian |
| <input type="checkbox"/> Court Of Lazarus | <input type="checkbox"/> House Diva |
| <input type="checkbox"/> Court Of Lightning Bay | <input type="checkbox"/> House Draconis |
| <input type="checkbox"/> Court Of Mendes | <input type="checkbox"/> House Drakco |
| <input type="checkbox"/> Court Of Southern Twilight | <input type="checkbox"/> House Eclipse |
| <input type="checkbox"/> Court Of The Barrens | <input type="checkbox"/> House Ek Tranos Dianoia |
| <input type="checkbox"/> Court Of The Black Raven | <input type="checkbox"/> House Eternal |
| <input type="checkbox"/> Court Of The Iron Garden | <input type="checkbox"/> House Helvenore |
| <input type="checkbox"/> Court Of Western Twilight | <input type="checkbox"/> House Hidden Shadows |
| <input type="checkbox"/> Coven Of Darkness | <input type="checkbox"/> House Khepera |
| <input type="checkbox"/> Haven Mercury | <input type="checkbox"/> House Kheperu |
| <input type="checkbox"/> Haven Of Kindred Spirits | <input type="checkbox"/> House Lilitu |
| <input type="checkbox"/> House Aeterno | <input type="checkbox"/> House Lost Haven |
| <input type="checkbox"/> House Amotah | <input type="checkbox"/> House Maidenfear |
| <input type="checkbox"/> House Anmazti | <input type="checkbox"/> House Malech |
| <input type="checkbox"/> House Black Dove | <input type="checkbox"/> House Mavenlore |

- | | |
|--|--|
| <input type="checkbox"/> House Miketh | <input type="checkbox"/> House Of The Fallen (Timbers) |
| <input type="checkbox"/> House Mystere & Brethren Of Nomaj | <input type="checkbox"/> House Of The Imperial Dragon |
| <input type="checkbox"/> House Negroth | <input type="checkbox"/> House Of The Morning Star |
| <input type="checkbox"/> House Nephilim | <input type="checkbox"/> House Of The Peaceful Anarchs |
| <input type="checkbox"/> House Night Breed | <input type="checkbox"/> House Of The Phoenix Vampires |
| <input type="checkbox"/> House Of Annunaki | <input type="checkbox"/> House Of The Setting Sun |
| <input type="checkbox"/> House Of Anpu (Anubis) | <input type="checkbox"/> House Of The Twilight Shadow |
| <input type="checkbox"/> House Of Bathory | <input type="checkbox"/> House Of Tortured Souls |
| <input type="checkbox"/> House Of Blood | <input type="checkbox"/> House Of Trylesta |
| <input type="checkbox"/> House Of Broken Reflections | <input type="checkbox"/> House Of Umbrae Octo |
| <input type="checkbox"/> House Of Caelen | <input type="checkbox"/> House Omallie |
| <input type="checkbox"/> House Of Candle | <input type="checkbox"/> House Omega |
| <input type="checkbox"/> House Of Caomhnóir-an-Eolas | <input type="checkbox"/> House Orion |
| <input type="checkbox"/> House Of Cyril | <input type="checkbox"/> House Orlocke |
| <input type="checkbox"/> House Of Dark Syns | <input type="checkbox"/> House Pantheon |
| <input type="checkbox"/> House Of Fallen Timbers | <input type="checkbox"/> House Phoenix Resurrectus |
| <input type="checkbox"/> House Of Hadattu | <input type="checkbox"/> House Quinotaur |
| <input type="checkbox"/> House Of La Bella Oscuridad | <input type="checkbox"/> House Rakseph |
| <input type="checkbox"/> House Of Lamia Sectae | <input type="checkbox"/> House Ravens Loch |
| <input type="checkbox"/> House Of Life | <input type="checkbox"/> House RavenShadow |
| <input type="checkbox"/> House Of Lunazure | <input type="checkbox"/> House Rendier |
| <input type="checkbox"/> House Of Ma'at | <input type="checkbox"/> House Riju |
| <input type="checkbox"/> House Of Madadh-Alluidh | <input type="checkbox"/> House Rising Serpent |
| <input type="checkbox"/> House Of Mancinni | <input type="checkbox"/> House Sable Brahmin |
| <input type="checkbox"/> House Of Melanelios | <input type="checkbox"/> House Sahjaza |
| <input type="checkbox"/> House Of Mystic Echoes | <input type="checkbox"/> House Sahjaza - Kalistree |
| <input type="checkbox"/> House Of Nephilim | <input type="checkbox"/> House Sahjaza - Mithu |
| <input type="checkbox"/> House Of NightRealm | <input type="checkbox"/> House Saint Germain |
| <input type="checkbox"/> House Of Nocturnal Retribution | <input type="checkbox"/> House Sanguine Moon |
| <input type="checkbox"/> House Of Novek | <input type="checkbox"/> House Scarlet Moon |
| <input type="checkbox"/> House Of Obscure Divinity | <input type="checkbox"/> House Serpentine |
| <input type="checkbox"/> House Of Osiris | <input type="checkbox"/> House Sethari |
| <input type="checkbox"/> House Of Ottawa | <input type="checkbox"/> House Seton |
| <input type="checkbox"/> House Of Pain | <input type="checkbox"/> House Storm |
| <input type="checkbox"/> House Of Phoenix Vampires | <input type="checkbox"/> House Terebus |
| <input type="checkbox"/> House Of Rex | <input type="checkbox"/> House Tirgoviste |
| <input type="checkbox"/> House Of Rose | <input type="checkbox"/> House Trylesta |
| <input type="checkbox"/> House Of Rosedrop | <input type="checkbox"/> House Trylestus |
| <input type="checkbox"/> House Of Sacred Gates | <input type="checkbox"/> House Verthaine |
| <input type="checkbox"/> House Of Sacred Night | <input type="checkbox"/> House Von Draconus |
| <input type="checkbox"/> House Of Shadows | <input type="checkbox"/> House Xavier |
| <input type="checkbox"/> House Of Sheol | <input type="checkbox"/> House Zvahan |
| <input type="checkbox"/> House Of Shiva | <input type="checkbox"/> Loyal Order Of St. Germaine |
| <input type="checkbox"/> House Of Silver Twilight | <input type="checkbox"/> Newcastle Vampire Society |
| <input type="checkbox"/> House Of Simion | <input type="checkbox"/> Order Of Enlightenment |
| <input type="checkbox"/> House Of Spiral Night | <input type="checkbox"/> Order Of Kharrus |
| <input type="checkbox"/> House Of The Ascending Path | <input type="checkbox"/> Order Of Nekhbet |
| <input type="checkbox"/> House Of The Black Rose | <input type="checkbox"/> Order Of Nevar |
| <input type="checkbox"/> House Of The Black Sun | <input type="checkbox"/> Order Of Nyx |
| <input type="checkbox"/> House Of The Crossroads Angels | <input type="checkbox"/> Order Of Sabbatica |
| <input type="checkbox"/> House Of The Dreaming | <input type="checkbox"/> Order Of Shadows |

- | | |
|---|--|
| <input type="checkbox"/> Order Of The Black Dragon | <input type="checkbox"/> Ordo Strigoi Vii |
| <input type="checkbox"/> Order Of The Black Sword | <input type="checkbox"/> Scarlet Moon Organization |
| <input type="checkbox"/> Order Of The Burning Sword | <input type="checkbox"/> Servitude Of Darkness |
| <input type="checkbox"/> Order Of The Crimson Tongues | <input type="checkbox"/> ShadowLore |
| <input type="checkbox"/> Order Of The Crystal Pheonix | <input type="checkbox"/> Society Nocturnus Of Gotham (SNOG) |
| <input type="checkbox"/> Order Of The Dragon | <input type="checkbox"/> St. Louis After Dark (SLAD) |
| <input type="checkbox"/> Order Of The Iron Vampires | <input type="checkbox"/> Temple Damaak |
| <input type="checkbox"/> Order Of The Necropolis | <input type="checkbox"/> Temple Of Eternal Night |
| <input type="checkbox"/> Order Of The Praetor | <input type="checkbox"/> Temple Of The Vampire |
| <input type="checkbox"/> Order Of The Red Dragon | <input type="checkbox"/> The Black Rose Society |
| <input type="checkbox"/> Order Of The Trapezohedron | <input type="checkbox"/> The Illuminati |
| <input type="checkbox"/> Order Of The Triple Flame | <input type="checkbox"/> The Scarlet Moon |
| <input type="checkbox"/> Order Of The Vampyre | <input type="checkbox"/> The Synod |
| <input type="checkbox"/> Order Of The Vandair | <input type="checkbox"/> The Tiboto Organization |
| <input type="checkbox"/> Order Of The Vein | <input type="checkbox"/> The Vampire Church |
| <input type="checkbox"/> Ordo Crux Ansata | <input type="checkbox"/> United Vampyre Unitarian Pagan (UVUP) |
| <input type="checkbox"/> Ordo Embraced By Twilight | <input type="checkbox"/> XY Society |
| <input type="checkbox"/> Ordo Sekhemu | <input type="checkbox"/> None |
| <input type="checkbox"/> Ordo Sahjaza Ventius | <input type="checkbox"/> Other: _____ |

227. If you have intentionally declined joining all Houses, et al. in the past please indicate reasons for this decision: (Check All That Apply)

- I Prefer A Solitary / Ronin Path Of My Own Choosing
- I Have Not Found A House That Reflects My Beliefs
- I'm Not Aware Of A House In My Area
- I Disagree With The Hierarchical Structure Of A House
- I Disagree With The Basic Governing Tenets Of A House
- I Disagree With The Concept Of Elders
- I Tend To Avoid Social Interaction With Others
- I Prefer To Avoid Political Or Personal Conflicts Within Or Between Houses
- Other: _____
- Not Applicable

228. If a House, et al. were chartered that appreciated the diversity of individual beliefs regarding vampirism while adhering to other personal preferences of structure would you consider joining?

- Yes
- No

229. Are you familiar with the Advanced Bonewits Cult Danger Evaluation Frame by Isaac Bonewits?

- Yes
- No

230. If yes, prior to joining any House, et al. have you ever used this system for evaluation of either the House itself or the Founder(s)/Elder(s)?

- Yes
- No
- Not Applicable

231. Houses, et al., serve an important role in the vampire community:

- Completely Agree
- Generally Agree

- Generally Disagree
- Completely Disagree

232. If you currently belong or have belonged in the past to a particular House, et al., do you feel their path or beliefs are clearly represented in a non-ambiguous manner to their members?

- Yes
- No
- Not Applicable

233. Do you object to the policy of a House, et al., that allows Wiccan members?

- Yes
- No

234. Do you object to the policy of a House, et al., that allows Luciferian members?

- Yes
- No

235. Do you object to the policy of a House, et al., that allows Christian members?

- Yes
- No

**236. Which, if any, of the following theories do you support as possible causes of vampirism?
(Check All That Apply)**

- Chakra / Body Energy Aberration Or Damage
- Demonic Possession Or Deity Influence
- Dormant Gene Theory
- Evolutionary Development Theory
- Otherkin Soul Inhabitation

- Recessive Gene Theory
- Symbiont Theory
- Viral Infection Theory
- Other: _____
- Not Applicable

237. The vast diversity of beliefs surrounding the various abilities and characteristics suggested to be shared among vampires is beneficial to the acceptance and believability of real vampires by the outside community?

- Completely Agree
- Generally Agree

- Generally Disagree
- Completely Disagree

238. Do you support the use of the word “prana” as an alternative use or compliment (in addition...) to the term “human energy” with the vampire community?

Prana is Sanskrit for 'moving force', or the 'life force' within the body (Hindu). Akin to 'chi' (Chinese & Japanese philosophy) and 'ruach' (Hebrew philosophy). The force that sustains life and diminishes as humans age.

- Yes - Alternative
- Yes - Compliment
- No

239. Do you support the use of the word “pranist” as an alternative use or compliment (in addition...) to the term of “vampire” within the vampire community?

- Yes - Alternative
- Yes - Compliment
- No

240. If you had to make a decision between the two, which spelling of the word “vampire” do you prefer to describe the “real vamp(i/y)re community”?

- Vampire
- Vampyre

The following questions represent one of the qualitative portions of this study. Please answer these questions in the space provided, keeping answers as short and concise as possible. Do NOT include responses of a direct personal nature.

In your own words...

241. If the word “vampire” did not exist, how would you describe your personal experience, including both the physical and spiritual understanding of your condition?

_____ < Multiple Line Field - Use As Much Space As Needed >

- Not Applicable

242. The greatest asset to the vampire community is...

_____ < Multiple Line Field - Use As Much Space As Needed >

243. The greatest contribution that the vampire community makes is...

_____ < Multiple Line Field - Use As Much Space As Needed >

244. The greatest inhibitor to the general public's understanding of the vampire community is...

_____ < Multiple Line Field - Use As Much Space As Needed >

245. The greatest hypocrisy of the vampire community is...

_____ < Multiple Line Field - Use As Much Space As Needed >

Community Involvement

246. What year did you become aware of the vampire community? (Please Answer Both If Applicable)

Offline Year: _____

Online Year: _____

247. How long have you been a participant in the online vampire community?

Less Than 1 Year

1 Year

2 Years

3 Years

4 Years

5 Or More Years

10 Or More Years

Not Applicable

248. How long have you been an observer of the online vampire community?

Less Than 1 Year

1 Year

2 Years

3 Years

4 Years

5 Or More Years

10 Or More Years

Not Applicable

249. If you were aware of the vampire community prior to 1992, what level of interaction did you have with community members? (Check All That Apply)

Met In Small Offline Social Groups (2 - 5)

Met In Large Offline Social Groups (6 - 10+)

BBS / Usenet Newsgroups Discussions

Other: _____

No Offline / Online Involvement

Not Applicable

250. Do you have an established nightside name or pseudonym that you use within the vampire community?

Yes

No

251. Do you participate at least once monthly on a vampire community forum or message board discussion?

Yes

No

252. Do you participate at least once monthly on a vampire community live web chat or internet relay chat (IRC) channel?

Yes

No

253. With what frequency do you attend clubs and parties specifically promoting or promoted by the vampire community?

- | | |
|---|--|
| <input type="checkbox"/> 1 - 3 Times Yearly | <input type="checkbox"/> 12 - 24 Times Yearly |
| <input type="checkbox"/> 4 - 6 Times Yearly | <input type="checkbox"/> More Than 24 Times Yearly |
| <input type="checkbox"/> 7 - 12 Time Yearly | <input type="checkbox"/> Rarely / Never |

254. With what frequency do you attend clubs and parties promoting the Goth community?

- | | |
|---|--|
| <input type="checkbox"/> 1 - 3 Times Yearly | <input type="checkbox"/> 12 - 24 Times Yearly |
| <input type="checkbox"/> 4 - 6 Times Yearly | <input type="checkbox"/> More Than 24 Times Yearly |
| <input type="checkbox"/> 7 - 12 Time Yearly | <input type="checkbox"/> Rarely / Never |

255. Which of the following vampire community events, festivals, or gatherings have you ever attended? (Check All That Apply)

- | | |
|--|--|
| <input type="checkbox"/> Baste Festival | <input type="checkbox"/> Endless Night Festival |
| <input type="checkbox"/> Black Abbey | <input type="checkbox"/> House Gatherings - 'Open House/Workshops' |
| <input type="checkbox"/> Black Atlantis | <input type="checkbox"/> Lost Boys' Beach Party |
| <input type="checkbox"/> Black Avalon | <input type="checkbox"/> Maiiah Festival |
| <input type="checkbox"/> Black Gotham | <input type="checkbox"/> Meetup.com Local Monthly Area Events |
| <input type="checkbox"/> Black Oaks | <input type="checkbox"/> Fang Club |
| <input type="checkbox"/> Black Sunset | <input type="checkbox"/> Night Of Immortal Stars |
| <input type="checkbox"/> Black Trillium | <input type="checkbox"/> Other Court Gatherings |
| <input type="checkbox"/> Black Xion | <input type="checkbox"/> Other 'Halo' or 'Quabal' Events |
| <input type="checkbox"/> Blood Letter's Valentine's Ball | <input type="checkbox"/> The Realm Of Darkness |
| <input type="checkbox"/> Crimson Festival | <input type="checkbox"/> The Vampyre Ball / Long Black Veil |
| <input type="checkbox"/> Devonshire Arms | <input type="checkbox"/> Vampyre Lounge |
| <input type="checkbox"/> Dracula's Ball | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Dragon Festival | <input type="checkbox"/> None |

256. Are you familiar with any Houses, Clans, Covens, Havens, Orders, or Courts in your geographic area?

- Yes
 No

257. If yes, are you familiar with individual members from those Houses, et al.?

- Yes
 No
 Not Applicable

258. The union of vampire Houses, et al. as an attempt to organize the community is a positive endeavor:

- | | |
|---|--|
| <input type="checkbox"/> Completely Agree | <input type="checkbox"/> Generally Disagree |
| <input type="checkbox"/> Generally Agree | <input type="checkbox"/> Completely Disagree |

259. The institution of Inner Sanctum Chairs/Choirs/Circles, Council's of Elders (ie: COVICA - Council Of Vampiric International Community Affairs, Vampire Nation, The Synod, etc.), or other 'guiding' or 'legislative' bodies within the community is a positive endeavor:

- Completely Agree
- Generally Agree

- Generally Disagree
- Completely Disagree

260. Houses, et al. should charge membership and other fees for access to higher levels of their instituted caste systems or membership hierarchies:

- Completely Agree
- Generally Agree

- Generally Disagree
- Completely Disagree

261. Have you ever held a bestowed title, eldership, or commonly recognized leadership position within a House(s), et al., Council, Society, or the vampire community in general?

- Yes
- No

262. Are you a member of a Vampire House, Clan, Coven, Haven, Order, or Court?

- Yes
- No

263. Which affiliation does this House, et al. represent?

- Sanguinarium
- Bloodlines
- Strigoi Vii
- Psi/Energy Work Based

- Non-Affiliated
- Other: _____
- Not Applicable

264. What year did you become a member or begin the initiation process?

Year: _____

- Not Applicable

265. If the House, et al. you joined required a period of review before being granted full membership, did you complete this process?

- Yes
- No - *Still In Process*
- No

- No Waiting Period
- Not Applicable

266. Individuals should be permitted to hold full membership in more than one House, et al. within the community at any one given time:

- Completely Agree
- Generally Agree

- Generally Disagree
- Completely Disagree

267. If the House, et al. you joined utilizes a system of glyphs or complex symbols are you competently versed in their meanings, origin, and proper use?

- Yes
- No
- Not Applicable

268. Have you ever participated in a ‘Sanguine Mass’ ritual?

- Yes
- No
- Not Applicable

269. How important are rituals, spells, and other ceremonies to the development and understanding of your personal vampiric nature?

- | | |
|--|---|
| <input type="checkbox"/> Always Important | <input type="checkbox"/> Rarely Important |
| <input type="checkbox"/> Usually Important | <input type="checkbox"/> Never Important |
| <input type="checkbox"/> Sometimes Important | <input type="checkbox"/> Not Applicable |

270. Do you wear an ankh or sigil pendant / ring? (Check All That Apply)

*A **sigil** is the identifying symbol of a house, order, coven, haven, or individual. The sigil often has ritual or symbolic significance for the individual or members of the household.*

- | | |
|---|--|
| <input type="checkbox"/> Yes - Ankh (Generic Egyptian Design) | <input type="checkbox"/> Yes - Sigil (House Specific Design) |
| <input type="checkbox"/> Yes - Ankh (House Specific Design) | <input type="checkbox"/> No |
| <input type="checkbox"/> Yes - Sigil (Individual Design) | |

271. Do you wear fangs either at social gatherings, in private, or at other times?

- Yes
- No

272. Do you tend to avoid others who identify themselves as vampires?

- Yes
- No

273. Do you have any ongoing personal conflicts with anyone in the vampire community that rise to the level of wishing to never have to communicate with that individual again in the future?

- Yes
- No

274. This question only applies to those who have left the online vampire community. For what specific reason(s) did you choose to leave or abstain from active participation? (Do NOT include responses that reference specific persons as a basis for your answer.)

< Multiple Line Field - Use As Much Space As Needed >

Not Applicable

275. Do you maintain a clear and distinct separation between your dayside (public) and nightside (vampire) participation in society?

Yes

No

276. Which individuals in your private life who are outside of the immediate vampire community are aware of you being a vampire? (Check All That Apply)

None

Family

Spouse / Partner

Co-Workers

Friends

Other: _____

Not Applicable

277. What number of people would you estimate know you are a vampire (or claim to be) outside of the immediate vampire community?

None

1 - 2

3 - 4

5 Or More

10 Or More

Not Applicable

278. Do you fear retaliation or reprisals from others if they learned of you either identifying with or claiming to be a part of the vampire community?

Yes

No

Not Applicable

279. Have you ever encountered any difficulties with someone in your family who found out you are a vampire that threatened the stability your relationship? (Check All That Apply)

- Yes - Father
- Yes - Mother
- Yes - Son
- Yes - Daughter

- Yes - Other: _____
- No
- Not Applicable

280. Have you ever encountered any difficulties with someone outside of your family who found out you were a vampire that threatened you directly in some manner? (Check All That Apply)

- Yes - Relationship
- Yes - Friendship
- Yes - Community Standing / Appointment
- Yes - Employment

- Yes - Other: _____
- No
- Not Applicable

Feeding & Donor

281. Real vampirism is a... (Check All That Apply)

- | | |
|---|---|
| <input type="checkbox"/> Clinical Psychiatric Disorder | <input type="checkbox"/> Physical Medical Condition |
| <input type="checkbox"/> Extension Of Blood Fetishism | <input type="checkbox"/> Social Identity Disorder |
| <input type="checkbox"/> Individual Identity Disorder | <input type="checkbox"/> Spiritual Condition |
| <input type="checkbox"/> Lifestyle Choice | <input type="checkbox"/> I'm Not Sure |
| <input type="checkbox"/> Mental Ability | <input type="checkbox"/> None Of The Above |
| <input type="checkbox"/> Mythological Concept / Folk Belief | <input type="checkbox"/> Not Applicable (No Belief In Vampires) |
| <input type="checkbox"/> Physical Ability | |

282. Do you feel that vampirism (psychic energy or sanguine desire) is a real phenomenon or do you feel that it is "in the mind"?

- Real Phenomena
 In The Mind

283. Do you feel that others can be "turned" into vampires? (Check All That Apply)

Consider three theoretical methods: (1) Transfer of vampiric symptoms to an otherwise non-vampiric human (creating a human with vampire-like symptoms and energy need) (2) Triggering of a permanent awakening, causing the true vampiric condition in a previously latent vampire (3) Triggering a permanent awakening, causing the true vampiric condition in an otherwise non-vampiric human.

- Yes - Transfer Of Vampiric Symptoms Only To A Human
 Yes - Trigger Of Permanent Awakening In A Latent Vampire
 Yes - Trigger Of Permanent Vampiric Condition In A Human
 No
 Not Applicable

284. Do you feel that vampirism can be permanently reversed or cured (that vampiric individuals can be made to no longer exhibit ongoing vampiric symptoms or require energy or blood)?

- Yes
 No
 Not Applicable

285. Do you consider yourself a sanguinarian (blood), psi, or hybrid vampire?

- | | |
|---------------------------------------|---|
| <input type="checkbox"/> Sanguinarian | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Psi | <input type="checkbox"/> Not Applicable |
| <input type="checkbox"/> Hybrid | |

286. Do you know the difference between a 'Psi' vampire and a 'Psychological' vampire?

- Yes
 No

287. Do you drink your own blood to satisfy cravings, also known as autovampirism?

Autovampirism is the drinking of one's own blood; also known to psychologists as clinical vampirism.

- Yes
- No
- Not Applicable

288. If you engage in autovampirism, does it reduce blood cravings?

- Yes
- No
- Not Applicable

289. As a vampire, have you had difficulties in the past finding a willing long-term donor?

- Yes
- No
- Not Applicable

290. Are you familiar with the concept of chakras?

*A **chakra** is thought to be an energy node in the human body. Chakras are thought to vitalize the physical body and to be associated with interactions of both a physical and mental nature. They are considered loci of life energy, or prana, which is thought to flow among them along pathways called nadis. The seven charka points are: Root, Sacrum, Solar Plexus, Heart/Lung, Throat, Third Eye, & Crown; each with different corresponding elements.*

- Yes
- No

**291. If you consider yourself a psi vampire, which of the following feeding sources do you utilize?
(Check All That Apply)**

- | | |
|---|---|
| <input type="checkbox"/> Ambient | <input type="checkbox"/> Spiritual Entities |
| <input type="checkbox"/> Astral | <input type="checkbox"/> Tactile |
| <input type="checkbox"/> Elemental / Environmental | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Human: Emotional / Empathy | <input type="checkbox"/> Not Applicable |
| <input type="checkbox"/> Human: Sex / Tantric | |

292. If your primary source is human, do you feed primarily from specific donors or ambiently (from surrounding environment)?

- Specific Donors
- Ambiently
- Not Applicable

293. As a psi vampire, do you engage in surface feeding?

Surface feeding involves feeding off the energy of a specific person's astral or etheric energy.

- Yes
- No
- Not Applicable

294. As a psi vampire, do you engage in deep feeding?

Deep feeding involves feeding off the energy of a specific person's core soul energy.

- Yes
- No
- Not Applicable

295. As a psi vampire, which of the following feeding methods do you employ? (Check All That Apply)

- Contact Feeding
- Directional Feeding
- Tendril Feeding
- Not Applicable

296. As a psi vampire, how often do you struggle with controlling unconscious feeding?

- Very Often
- Fairly Often
- Occasionally
- Rarely
- Never
- Not Applicable

297. If, or when, you struggle with unconscious feeding do you ever practice or utilize visualization techniques as a method of shielding?

- Yes
- No
- Not Applicable

298. Are you especially sensitive to the emotions of others around you?

- Yes
- No
- I Don't Know

299. Do you take on the emotions of those around you?

- Yes
- No
- I Don't Know

300. Do you reflect the emotions of those around you?

- Yes
- No
- I Don't Know

301. Do others around you reflect your emotions?

- Yes
- No
- I Don't Know

302. Do you feed from one gender or both?

- Male Gender Only
- Female Gender Only
- Both Genders
- Not Applicable

303. How many donors do you typically have when actively engaged in feeding?

- 1 Donor
- 2 Donors
- 3 Donors
- 4 Donors
- 5 Or More Donors
- 10 Or More Donors
- Unknown
- Not Applicable

304. How long do you typically go between feedings?

- Daily
- Weekly
- Monthly
- 2 - 3 Months
- 4 - 5 Months
- 5 - 6 Months
- 6 Months Or More
- Yearly
- Longer Than 1 Year
- Not Applicable

305. What is the longest period of time you have gone between feeding?

Time Period: _____

- Not Applicable

306. Does your activity level seem to vary in direct relation to time between feedings?

- Yes
- No
- Not Applicable

307. Have you ever attempted to “reject” your vampirism by not feeding?

- Yes
- No
- Not Applicable

* Optional: If yes, describe what physical, mental, or spiritual effects manifested as a result, along with their duration?

_____ < Multiple Line Field - Use As Much Space As Needed >

308. If you stopped feeding in an attempt to “reject” your vampirism, were you successful in permanently “curing” yourself?

- Yes
- No
- Not Applicable

309. Do those you feed from normally show a visible reaction to your feeding? (Check All That Apply)

- Yes, They Get Anxious
- Yes, They Get Calm / Relaxed
- Yes, They Get Energized
- Yes, They Get Increased Arousal
- Yes, They Get Tired
- Yes, All / Some Of Above (Different For Each Donor)
- Yes, Other Reaction * Describe: _____
- No, No Visible Reaction
- Not Applicable

310. Can you help your donor heal or recover from your feeding through energy techniques?

- Yes
- No
- Not Applicable

311. If you are sanguinarian, do you have psi/psionic abilities (including either energy perception or manipulation)?

- Yes
- No
- Not Applicable

312. If you are sanguinarian, what are your methods of drawing blood? (Check All That Apply)

- | | |
|----------------------------------|---|
| <input type="checkbox"/> Knife | <input type="checkbox"/> Syringe / Needle |
| <input type="checkbox"/> Lancet | <input type="checkbox"/> Teeth / Fangs |
| <input type="checkbox"/> Razor | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Scalpel | <input type="checkbox"/> Not Applicable |

313. If you are sanguinarian, what amount of blood do you typically consume per feeding?

- | | |
|---|--|
| <input type="checkbox"/> Less Than 1 oz | <input type="checkbox"/> More Than 1 Cup |
| <input type="checkbox"/> 1 - 2 oz | <input type="checkbox"/> Unknown Measurement |
| <input type="checkbox"/> 2 - 4 oz | <input type="checkbox"/> Not Applicable |
| <input type="checkbox"/> 4 - 6 oz | |

314. If you are sanguinarian, and feed strictly psychically by taking life/core energy (not psi/auric), do you find that feeding alleviates all symptoms of hunger (including detrimental effects from not feeding), or do you feel it is lacking?

- | | |
|---|---|
| <input type="checkbox"/> Alleviates All Symptoms | <input type="checkbox"/> Does Not Adequately Alleviate Hunger |
| <input type="checkbox"/> Moderately Alleviates Symptoms | <input type="checkbox"/> Not Applicable |

315. If you feel it is lacking, what negative symptoms remain that suggest this?

Symptoms: _____

- Not Applicable

316. Do you feed from animal sources as well as human donors?

- Yes
 No
 Not Applicable

317. If yes, which of the following sources do you use?

- | | |
|--|--|
| <input type="checkbox"/> Blood Drawn From Live Animal | <input type="checkbox"/> Energy From Wild Animal |
| <input type="checkbox"/> Blood Taken From Dead Animal | <input type="checkbox"/> Raw Meat / Rare Steaks |
| <input type="checkbox"/> Energy From Domesticated Animal | <input type="checkbox"/> Not Applicable |

318. Have you ever practiced animal sacrifice in relation to your vampirism?

- Yes
 No
 Not Applicable

319. If you are sanguinarian, and you feed strictly on animal blood/rare steaks, do you find that this alleviates all symptoms of hunger (including detrimental effects from not feeding), or do you feel it is lacking?

- | | |
|---|---|
| <input type="checkbox"/> Alleviates All Symptoms | <input type="checkbox"/> Does Not Adequately Alleviate Hunger |
| <input type="checkbox"/> Moderately Alleviates Symptoms | <input type="checkbox"/> Not Applicable |

320. If you feel it is lacking, what negative symptoms remain that suggest this?

Symptoms: _____

- Not Applicable

321. Do you engage in blood rituals or blood magick?

- Yes
 No

322. Have you ever engaged in the practice of ‘cutting’ yourself, others, or have been cut by others in a non-vampiric related manner? (Check All That Apply)

- Yes - Cut Self
- Yes - Cut Others

- Yes - Cut By Others
- No

323. What method do you use to store blood that is not consumed right away? (Check All That Apply)

- Refrigerator
- Freezer

- Other: _____
- Not Applicable

324. If you store blood, how do you later imbibe that blood?

- Blood By Itself
- Mixed With Non-Alcoholic Liquid
- Mixed With Alcoholic Liquid

- Mixed With Other Solid
- Other: _____
- Not Applicable

325. What blood substitutes do you use when you can't feed from blood? (Check All That Apply)

- Alchemic Recipes
- Animal Blood / Meat
- Chocolate
- Fruit
- Herbal Teas
- Juices
- Meditation / Yoga

- Milk
- Red Wine
- Salt
- Vegetables
- Vitamins / Supplements
- Other: _____
- Not Applicable

326. If you are a practicing sanguine vampire, does your physician know about your lifestyle?

- Yes
- No
- Not Applicable

327. Are you regularly checked for pathogens and other blood born diseases?

- Yes
- No

328. Do you have a tendency to overindulge in food or drink when you need to feed?

- Yes
- No
- Not Applicable

**329. As you have aged, have your feeding methods or abilities changed dramatically?
(Check All That Apply)**

- Yes - Increased Proficiency In Primary Method(s)
- Yes - Decreased Proficiency In Primary Method(s)
- Yes - Increased Proficiency In Alternate Method(s)
- Yes - Decreased Proficiency In Alternate Method(s)
- Yes - Sang To Psi Feeding Method Switch
- Yes - Psi To Sang Feeding Method Switch
- No
- Not Applicable

The following ten questions apply to both donors and vampires who also serve as donors:

330. Have you ever been a donor?

- Yes
- No

331. What is the longest period of time in which you have been in a continuous donor relationship (arrangement)?

- | | |
|---|---|
| <input type="checkbox"/> Less Than 1 Year | <input type="checkbox"/> 5 - 10 Years |
| <input type="checkbox"/> 1 - 2 Years | <input type="checkbox"/> More Than 10 Years |
| <input type="checkbox"/> 3 - 5 Years | <input type="checkbox"/> Not Applicable |

332. Are you familiar with a document known as the Donors' Bill Of Rights?

- Yes
- No

333. How did you first become a donor?

- Began Donating To Existing Friend Or Partner
- Actively Sought Vampire(s) In Online Community
- Actively Sought Vampire(s) In Offline Community
- Was Approached By Vampire(s) In Online Community
- Was Approached By Vampire(s) In Offline Community
- Other: _____
- Not Applicable

334. How many vampires have you been a willing donor for?

- | | |
|-------------------------------------|--|
| <input type="checkbox"/> 1 Vampire | <input type="checkbox"/> 5 Or More Vampires |
| <input type="checkbox"/> 2 Vampires | <input type="checkbox"/> 10 Or More Vampires |
| <input type="checkbox"/> 3 Vampires | <input type="checkbox"/> Unknown |
| <input type="checkbox"/> 4 Vampires | <input type="checkbox"/> Not Applicable |

335. In which capacity do you donate? (Check All That Apply)

- Blood Sexually
 Energy (Psi or Life/Core) Not Applicable

336. If the current donor-vampire relationship you are involved with ended, do you think you would seek out another vampire for which to be a donor?

- Yes
 No
 Not Applicable

337. As a donor, are you often involved in the personal lives (outside of arrangement) of the vampires to which you donate?

- Yes
 No
 Not Applicable

338. As a vampire, are you often involved in the personal lives (outside of arrangement) of the donors from which you feed?

- Yes
 No
 Not Applicable

339. Have you "fed" more than one vampire during the same time period; a non-exclusive donor?

- Yes
 No
 Not Applicable

Community Ethics

340. Are you concerned with Local, Federal / National, or International law enforcement invading privacy rights by observing activities of the vampire community?

- Yes
 No

341. Are you concerned about the possibility of legislative censorship, private club or open gathering licensing restrictions, or cultural profiling by law enforcement of the vampire subculture?

- Yes
 No

342. What is your opinion on vampire organizations that market products while also being involved in music or club promotion?

- Completely Approve
 Generally Approve
 Generally Disapprove
 Completely Disapprove

343. Do you agree with public displays (Political Or Social Aspirations), television or video appearances (Mad Mad House / A&E Halloween Special / The Vampyre Lounge), or otherwise open promotion (Regional Meetup Clubs & Events) of the vampire “lifestyle” to the public (mundane) population?

- Yes
 No
 Not Sure

344. Do these displays or appearances help promote the acceptance and understanding of the vampire community or increase the divide between the public (mundane) perception of vampires and reality?

- Promote Acceptance & Understanding Of The Community
 Draw Negative Attention To The Community
 Promote An Alternative Lifestyle To The Public
 No Effect
 Not Sure

**345. The vampire community’s association with Sanguine vampirism...
(Check All That Apply)**

- Strengthens The Community
 Divides The Community
 Increases Acceptance Outside The Community
 Decreases Acceptance Outside The Community
 No Effect

346. The vampire community's association with Psychic vampirism...

(Check All That Apply)

- Strengthens The Community
- Divides The Community
- Increases Acceptance Outside The Community
- Decreases Acceptance Outside The Community
- No Effect

347. The vampire community's association with Otherkin...

(Check All That Apply)

Otherkin is a subculture made up of people who describe themselves as being non-human in some way, sometimes believing themselves to be mythological or legendary creatures.

- Strengthens The Community
- Divides The Community
- Increases Acceptance Outside The Community
- Decreases Acceptance Outside The Community
- No Effect

348. The vampire community's association with a belief in Symbionts...

(Check All That Apply)

Vampire symbionts are loosely defined as astral or noncorporeal entities that attach to a person's energy system in the aura or near the heart and solar plexus chakra points, subsequently causing the vampiric condition by parasitic "leech" feeding, creating an artificially induced energy deficiency in the host.

- Strengthens The Community
- Divides The Community
- Increases Acceptance Outside The Community
- Decreases Acceptance Outside The Community
- No Effect

349. The vampire community's association with a belief in Therianthropy...

(Check All That Apply)

Therianthropy is a generic term for any transformation, physical, mental, or spiritual of a human into another animal form, or for a being which displays both human and animal characteristics, either as a part of mythology or as a spiritual concept.

- Strengthens The Community
- Divides The Community
- Increases Acceptance Outside The Community
- Decreases Acceptance Outside The Community
- No Effect

350. The vampire community's association with a belief in Transmogrification...

(Check All That Apply)

Transmogrification is a generic term for any physical change in shape, form, or appearance. Sometimes referred to as shapeshifting or morphing.

- Strengthens The Community
- Divides The Community
- Increases Acceptance Outside The Community
- Decreases Acceptance Outside The Community
- No Effect

351. The vampire community should adopt a single or universal document for ethical adherence:

- Completely Agree
- Generally Agree
- Generally Disagree
- Completely Disagree

352. Tolerance of individual religious beliefs (whether they be Christian, Wiccan, Satanist, etc.) should be a universal precept of the vampire community:

- Completely Agree
- Generally Agree
- Generally Disagree
- Completely Disagree

353. An international group or council of Houses, et al. should be established for the investigation of serious legal allegations leveled against members of the vampire community:

- Completely Agree
- Generally Agree
- Generally Disagree
- Completely Disagree

354. The vampire community is taking enough steps as a collective body to help dispel general public misconception or fear of the community:

- Completely Agree
- Generally Agree
- Generally Disagree
- Completely Disagree

355. Which, if any, of the following misconducts are you aware of being propagated by members of the vampire community? (Check All That Apply)

- Physical Abuse Of Donors
- Psychological Abuse Of Donors
- Sexual Abuse Of Donors
- Physical Abuse Of Other Vampires (Affiliated Or Solitary)
- Psychological Abuse Of Other Vampires (Affiliated Or Solitary)
- Sexual Abuse Of Other Vampires (Affiliated Or Solitary)
- Illegal Activity On The Part Of A House
- Illegal Activity On The Part Of An Individual Vampire
- Violation Of The Personal Privacy Of Community Members
- Direct Online Or Offline Slander Against Others Or Houses In Public Arena
- Coercion / Misrepresentation Of Intent On The Part Of A House
- Other: _____
- None

356. Are you familiar with the Black Veil?

The Black Veil is a code of ethics written for the Sanguinarium movement and has been adopted by many individuals, households and organizations within the vampire community.

- Yes
- No

357. Do you believe the Black Veil (v2.0) remains a valid and ‘living’ document today?

- Yes
- No
- Not Applicable

358. Do you follow the Black Veil as the basis of your personal vampire ethics?

- Yes
- No
- Not Applicable

359. Which of the following sets of ethics or guidelines do you follow both within and outside of the vampire community? (Check All That Apply)

- | | |
|--|---|
| <input type="checkbox"/> Castes / Creeds | <input type="checkbox"/> Vampire Bible |
| <input type="checkbox"/> Holy Bible | <input type="checkbox"/> Vampyre Codex (Sanguinarium) |
| <input type="checkbox"/> Personal Ethics | <input type="checkbox"/> Vedas |
| <input type="checkbox"/> Psychic Vampire Codex / Khepriian Codex | <input type="checkbox"/> Witches Bible |
| <input type="checkbox"/> Quran (Koran) | <input type="checkbox"/> None |
| <input type="checkbox"/> Satanic Bible | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Scrolls Of Elorath / Strigoi Vii Codex | <input type="checkbox"/> Not Applicable |
| <input type="checkbox"/> Torah | |

360. The vampire community should hold elders, public spokespersons, or other leaders accountable for their personal actions that run contrary to commonly accepted ethical tenets within the community?

- | | |
|---|--|
| <input type="checkbox"/> Completely Agree | <input type="checkbox"/> Generally Disagree |
| <input type="checkbox"/> Generally Agree | <input type="checkbox"/> Completely Disagree |

361. If you agree, how should such leaders be held accountable? (Check All That Apply)

- Community Notification Of Offense
- Temporary Exclusion From Community Events
- Requirement Of Apology To Be Issued
- Sin Nomine (Excommunication) From The Community If Serious Offense
- They Should Not Be Punished, Only Situation Acknowledged - “Each Vampire To Their Own”
- I’m Not Sure
- Other: _____
- Not Applicable

362. Which violations in common law or other questionable ethical concerns should result in the issuance of a Sin Nomine (or other form of ostracism) against any member of the community?

(Check All That Apply)

Sin Nomine (Latin) refers to a vampire who has been stripped of his or her name and recognition within the community for having committed a 'great crime' in the eyes of the community.

- Physical Abuse Of Donors
- Sexual Abuse Of Donors
- Physical Abuse Of Other Vampires
- Sexual Abuse Of Other Vampires
- Coercion Or Bribery Of Other Vampires / House Members
- Endangerment Of The Community By Engaging In Illegal Activity
- Violation Of The Personal Privacy Of Community Members
- Direct Offline Slander Against Others Or Houses In Public Arena
- Other: _____

363. How effective do you think the issuance of such an order by a self-appointed authority would have in curtailing future violations within the community?

- Very Effective
- Somewhat Effective
- Not Effective

The following questions represent one of the qualitative portions of this study. Please answer these questions in the space provided, keeping answers as short and concise as possible. Do NOT include responses of a personally identifiable nature or cite either historical or specific community entities or persons as a basis for your answer.

How would you react and subsequently deal with the following set of hypothetical circumstances?
(All Questions Assume Respondent To Be A Vampire - If Not, Leave Blank)

364. You are a member of a House and witness an as of yet unsubstantiated rumor of a fellow House member being spread on an open-forum vampire message board.

_____ < Multiple Line Field - Use As Much Space As Needed >

365. You discover an internet message board on which a member posts an offer to teach Awakening individuals about vampirism or to turn people into vampires, in return for money or favors.

_____ < Multiple Line Field - Use As Much Space As Needed >

366. Someone you know in the vampire community physically or sexually abused a donor and you are faced with the decision to either report this to law enforcement or keep it to yourself.

_____ < Multiple Line Field - Use As Much Space As Needed >

367. A new council is formed with an ambitious charter to organize groups and actively recruit “fresh blood” in the vampire community. They are contacting elders to join and participate with strict guidelines for membership and with the intention of excluding several well respected Houses in the community for which they have either a conflict or do not respect their views regarding vampirism.

_____ < Multiple Line Field - Use As Much Space As Needed >

368. On a major open-forum vampire message board an anonymous member makes sensational claims that they obtain blood through violence, in the manner of fictional vampires.

_____ < Multiple Line Field - Use As Much Space As Needed >

369. The House or Order you have recently joined is requiring you to perform a ritual to show your devotion to their path that makes you feel either uncomfortable from a moral or personally religious viewpoint.

_____ < Multiple Line Field - Use As Much Space As Needed >

370. You have spent the last week preparing an article for submission to a local open-forum or vampire related community print publication and ask a fellow "trusted" friend to review and offer suggestions. This friend in turn publishes your work in full under their own name on a popular open-forum vampire message board.

_____ < Multiple Line Field - Use As Much Space As Needed >

371. You discover a local self-proclaimed "vampire" known to be involved in role-playing games is speaking with minors of the "coolness" and "prestige" of being turned into a "vampire."

_____ < Multiple Line Field - Use As Much Space As Needed >

The Future

372. Do you view vampirism as a lifetime endeavor or temporary endeavor?

- Lifetime
 Temporary

373. Where do you see the vampire community in 10 years? (Check All That Apply)

- A More Organized Community
 A Less Organized Community
 A More Public Community
 A More Underground Community
 Other: _____
 No Changes

374. Psi / Psionics will be accepted by mainstream culture within the next 25 years:

- Completely Agree
 Generally Agree
 Generally Disagree
 Completely Disagree

375. Psi / Psionics will be accepted by mainstream science within the next 25 years:

- Completely Agree
 Generally Agree
 Generally Disagree
 Completely Disagree

376. Do you think there will be a greater awareness by the public (mundane) population of the vampire community as time progresses?

Mundane in this use refers to those who are not vampires or otherwise awakened.

- Yes
 No
 Not Sure

377. If yes, what overall effect would this increase in awareness have on the vampire community?

- Positive
 Negative
 Mixed
 Not Sure
 Not Applicable

378. Do you think there will be a greater acceptance by the occult, pagan, magick, et al. communities of the vampire community as time progresses?

- Yes
 No
 Not Sure

379. Do you think there will be a greater acceptance by the mundane population of the vampire community as time progresses?

- Yes
- No
- Not Sure

Exclusion Option:

Provide A 7 Digit Random Number & Letter Combination Code: _____

Please make a note of this code before submitting this survey. You may provide this code in the future to those conducting this study as a means to remove your responses from inclusion into the final research analysis. This step is included as a formality of ethical research conduct, to provide you with the right to be removed from the study at any time.

Disclaimer:

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**Vampire & Energy Work Research Survey
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Merticus * Zero * Kiera * Eclecta * SoulSplat

**Atlanta Vampire Alliance [AVA]
6300 Powers Ferry Rd.
Suite 600 - 283
Atlanta, GA 30339**

www.atlantavampirealliance.com



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